



❖❖❖ Corporate Office Mailing Address: P.O. Box 2129, Durham, NC 27702 ❖❖❖

Durham Location: 1303 E. Geer St, Durham, NC 27704, 919 / 682-2655, 800 / 768-2655
Raleigh Location: 2601 Noblin Rd., Raleigh, NC 27604, 919 / 848-9242, 866 / 552-2224
Greensboro Location: 7055 Albert Pick Rd., Greensboro, NC 27409, 336 / 665-9099, 877 / 665-9099
Columbia Location: 700-A Buckner Rd., Columbia, SC 29203, 803 / 714-0003, 800 / 524-0003
Richmond Location: 5424 Jefferson Davis Hwy., Richmond, VA 23234, 804 / 275-9810, 800 / 318-2250
Knoxville Location: 127 Chickamauga Ave., Knoxville, TN 37917, 865 / 330-6999, 877 / 875-6999

Approved By: \_\_\_\_\_

CREDIT APPLICATION

Date: \_\_\_\_\_

(Return Fax to: 919 / 226-3443)

Salesman: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ (P.O. #, etc.) (City) (State) (Zip)

Street Address: \_\_\_\_\_ (Street #, incl. Suite #, etc.) (City) (State) (Zip)

Business Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fed. ID #: \_\_\_\_\_

Business Structure: Sole Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_, in which State: \_\_\_\_\_ DUNS #: \_\_\_\_\_

President/Owner: \_\_\_\_\_ Secretary: \_\_\_\_\_

Vice President: \_\_\_\_\_ Treasurer: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Year Started: \_\_\_\_\_

Are Purchase Orders Required? Yes \_\_\_\_\_ No \_\_\_\_\_ Are Job Numbers Required? Yes \_\_\_\_\_ No \_\_\_\_\_
Are You Tax-Exempt? Yes \_\_\_\_\_ No \_\_\_\_\_ If "Yes", your Exemption Certificate must be provided.

Accounts Payable Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

What is your Payment Policy? \_\_\_\_\_ Do You Require Pay Apps? Yes \_\_\_\_\_ No \_\_\_\_\_ AIA? Yes \_\_\_\_\_ No \_\_\_\_\_

Erection Labor Charges are to be Pre-paid. (Any amount past due 60 days or more is subject to a Finance Charge of 1.5% per month.)

PLEASE ATTACH A LIST OF AUTHORIZED PURCHASERS WITH APPLICATION

TRADE REFERENCES

(No Credit Cards or Department Stores)

1. Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Address: \_\_\_\_\_ Contact: \_\_\_\_\_
(Street or P.O. #) (City) (State) (Zip)

2. Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Address: \_\_\_\_\_ Contact: \_\_\_\_\_
(Street or P.O. #) (City) (State) (Zip)

3. Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Address: \_\_\_\_\_ Contact: \_\_\_\_\_
(Street or P.O. #) (City) (State) (Zip)

4. Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Address: \_\_\_\_\_ Contact: \_\_\_\_\_
(Street or P.O. #) (City) (State) (Zip)

5. Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Address: \_\_\_\_\_ Contact: \_\_\_\_\_
(Street or P.O. #) (City) (State) (Zip)

Bank: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Address: \_\_\_\_\_ Contact: \_\_\_\_\_
(Street or P.O. #) (City) (State) (Zip)

I hereby give permission to Associated Scaffolding Company, Inc. and/or it's agent(s) to use any source available to it in order to investigate the credit worthiness of the company or person applying for an account with Associated Scaffolding Company, Inc., knowing that our Terms are Net 28 days from date of delivery and if I default on my account, I will be subject to attorneys' fees, court cost & post-judgment interest.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_



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Person to contact for payment: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Person completing application: \_\_\_\_\_

### Personal Guarantee by Officer

I, \_\_\_\_\_, residing  
(Name of Signer)

at \_\_\_\_\_ for and  
(Street/City Address of Signer)

in consideration of Associated Scaffolding Company, Inc. (hereinafter referred to as "ASC") extending credit at my request  
to \_\_\_\_\_, (hereinafter referred to as the "Company"),  
(Company Name)

of which I am \_\_\_\_\_, hereby personally guarantee to ASC the  
(Title or Position)  
payment at 1303 East Geer St., Durham, NC 27704 or P.O. Box 2129, Durham, NC 27702, of any organization of the  
Company and I hereby agree to bind myself to pay ASC on demand any sum which may become due to it by the Company,  
whenever the Company shall fail to pay the same. It is understood that this guarantee shall be continuing and irrevocable  
for such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice thereof and consent to  
any modification or renewal of the credit agreement hereby guaranteed.

Signature: \_\_\_\_\_ (Seal) Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ S.S. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Spouse's Signature: \_\_\_\_\_ (Seal) Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ S.S. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_