

171 East Hollis Street
Nashua, NH 03060-6319
Phone: 1-800-370-0100



875 Page Street
Manchester, NH 03104
Fax: (603) 889-7308

Monday - Friday 6:30 A.M. to 5 P.M. • Saturday 7:30 A.M. to 11 A.M.

FOR OFFICE USE ONLY
APP GIVEN BY _____
CREDIT LIMIT _____

APPLICATION FOR CREDIT

COMPANY NAME _____

SHIPPING ADDRESS:

STREET ADDRESS _____

CITY _____

STATE _____ ZIP _____

BILLING ADDRESS (if different):

MAILING ADDRESS _____

CITY _____

STATE _____ ZIP _____

PHONE _____

FAX _____

E-MAIL _____

HOW LONG IN BUSINESS? _____

Monthly \$ Credit Requested _____ PO REQUIRED

Sole Proprietorship Partnership Corporation

TAX EXEMPT – *Attach Certificate Copy (ST4)*

EPA CERTIFIED – *Attach Copy of Approved Card*

Invoices To Be Sent (check one):

Weekly Mail Daily Fax _____

Daily E-Mail _____

REFERENCES – BANK (checking account)

Name	Address	Account Number

REFERENCES – TRADE

Name	Branch Town, State	Account Number	Phone Number

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY AND ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH THE FOLLOWING TERMS:

- Terms: 1% – 10th Net 30th. (A) 1% discount will be allowed on invoices if paid by the 10th of the following months. (B) Net 30th – Invoices **MUST BE PAID** by the 30th of the month following purchase.
- There will be a 2% per month finance charge (25% per annum) on any outstanding amounts due over 30 days. This rate will continue to accrue during the pendency of any litigation or collection efforts until paid in full.
- I (we) guarantee payment of any debts thus contracted.
- The applicant hereby agrees to pay the cost of collection, including attorney's fees and court costs, in the event such collection measures are necessary.
- I (we) authorize my bank(s) stated above to provide information for credit purposes.
- The terms of this Credit Application shall supersede any terms established on any purchase orders provided by you, the customer.
- The above information is for the purpose of obtaining credit and is warranted to be true.

BY _____ TITLE _____ DATE _____

BY _____ TITLE _____ DATE _____

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FOR ALL YOUR HEATING & COOLING NEEDS

PRINCIPAL(S):

Individual Name	Home Address, City, State, Zip	Social Security #	Date of Birth
Individual Name	Home Address, City, State, Zip	Social Security #	Date of Birth
Individual Name	Home Address, City, State, Zip	Social Security #	Date of Birth

CONTACT PERSON: SALES _____ ACCOUNTS PAYABLE _____

HAVE YOU EVER FILED BANKRUPTCY? _____ PERSONAL OR BUSINESS? _____ WHEN? _____

CONTINUING GUARANTEE

WHEREAS, TOTAL AIR SUPPLY, INC. has been asked by _____
(herein after referred to as Debtor Business) to extend credit to it and *(Debtor Business)*

WHEREAS, the said TOTAL AIR SUPPLY, INC. is willing to extend such credit only on the condition that the Guarantor will guarantee payment of any debts thus contracted by the said Debtor Business.

WHEREAS, the undersigned Guarantor is a principal of Debtor Business.

NOW, THEREFORE, for value received, the Guarantor, jointly, severally and individually does hereby guarantee full payment of any debts that may be incurred in favor of TOTAL AIR SUPPLY, INC. by Debtor Business now or any time in the future.

This Guarantee shall be construed as an absolute, continuing and unlimited guarantee of payment without regard to the regularity of any liability or obligation of said Debtor Business hereby guaranteed; and the said

TOTAL AIR SUPPLY, INC. shall not required to proceed first against the said Debtor Business or any other person, firm or corporation or against any collateral security held by him before resorting to the Guarantor for payment.

TOTAL AIR SUPPLY, INC. terms of sale are 1% – 10th Net 30th. Past due accounts will be subject to a finance charge of 2% per month (24% annually). Interest shall continue to accrue at the above stated rate during the pendency of any litigation or collection efforts until paid in full

In the event of necessary legal action to collect outstanding and delinquent debts due TOTAL AIR SUPPLY, INC., I fully agree to assume and pay the full amount of the debt plus any and all reasonable legal fees and all collection fees.

This Guarantee shall supersede any terms established on any purchase orders provided by you, the debtor Business.

This Guarantee shall also apply to all outstanding obligations of the debtor incurred prior to the date indicated below.

Signed _____ Date _____ Witness _____ Date _____
(Guarantor's Personal Signature)

Signed _____ Date _____ Witness _____ Date _____
(Guarantor's Personal Signature)

Signed _____ Date _____ Witness _____ Date _____
(Spouse's Personal Signature)

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Interviewed By _____
Date _____

Account # _____
Date Opened _____
Opened By _____

CUSTOMER PROFILE

Company Name _____
Address _____ City _____ State/Zip _____
Your Name _____ Position/Title _____
Company Owner's Name _____
Sales Contact Name _____ Estimators Name _____
Phone # _____ Cell # _____ Fax # _____
How did you hear about Total Air Supply? _____
What will you be looking to purchase from us? _____
Who do you currently purchase from? _____
Why? _____
Previous Employer (if applicable) _____

BUSINESS PROFILE

How long has the company been in business? _____
Estimated annual purchases: _____ Estimate percentage of business:
Residential _____% Gas _____%
Commercial _____% Oil _____%
Retro _____% **100%**
Service _____% **100%**

Are you EPA certified? YES NO License # _____ (provide copies)
Are you gas licensed? YES NO License # _____ (provide copies)
What current line of equipment do you install? _____
Do you buy and install square commercial duct? _____
Do you buy and install spiral pipe? _____
Who is your current supplier of shopwork? _____

****** OFFICE USE ONLY ******

Manchester Store Hours of Operation
 Delivery Options, to their shop, job site 24 hour fax line
 Add to our mailing list? ___ YES ___ NO Add to our e-mail list? ___ YES ___ NO