

Physical Location: 915/917 Webster St. Dayton, Ohio 45404 Lyons Electrical Supply Co. Lyons Lighting Showroom Phone: 937-224-5491

Fax: 937-224-3833

Mailing Address: P.O. Box 96 Dayton, Ohio 45401

Commercial Credit Application

Company Name						
Subsidiary of						
Billing Address	City_		City	State	Zip_	
Shipping Address		City		State	Zip	
Phone No	Fax No		email			
Type of Business	SS# or Fed.ID.#					
Sole Proprietorship () State of Incorporation:_		ral (Limited (Corporation: S Corp. \bigcirc	C Corp.	LLC (
Owner/Officer	Owner/Officer					
Title	SS#		Title		SS#	
Home Address			Home Ad	dress		
City	State	Zip	City		_State	Zip
Home Phone	Drivers License		Home Ph	one	Drivers License	
		<u>B</u>	BANK REFERE	<u>NCE</u>		
Name of Bank	Name of Banker					
Location	C	hecking	Account#	Savings Acco	ngs Account#	
		<u>TR</u>	ADE REFERE	NCES		
Company			_ Company	'		
Address			Address_			
City	State	Zip	City		State	Zip
Pnono#	ACCOUNT#		⊔nono#		// CCOLINT#	





TRADE REFERENCES CONTINUED Company_____ Company_____ _____ Address____ City State Zip City State Zip Phone#_____Account#_____Phone#_____Account#____ Terms: Credit terms are based on credit rating, invoices 30 days past due will be assessed a 2% per month Finance Charge (in accordance with the Usury Laws of the state). I/We understand and agree that the information provided is for the purpose of obtaining credit. I/We further understand and agree that all accounts or monies due to Lyons Electrical Supply Co. shall be paid in accordance with the Credit Terms stated above and agree to pay all reasonable costs of collection, in addition to any court costs and/or attorney fees incurred. I/We authorize investigation of all credit references listed. Authorized by: _____ Title _____ Date_____ Authorized by: Title Date Guaranty: I/We, the undersigned, do hereby guarantee payment, as individuals, of any indebtedness incurred by virtue of an/and all credit extended in accordance with the above agreement and all of its terms and conditions. Guarantor:______, Individually Date______ Guarantor:_______, Individually Date______