Business Credit Application



Tucson, AZ | Prescott Valley, AZ

Remit to:
American Hose LLC
3645 E. 44th St
Tucson, AZ 85713
accounting@amhose.com
Pay online 24/7
www.amhose.com

| Legal Business Name | | Trade Name-DBA | | | Phone # | | | |
|--|------------------|-----------------------|------------|----------|-------------|--------------|----------|--|
| | | | | | Email: | | | |
| Billing Address | | City | | | State | 2 | Zip Code | |
| Shipping Address | | City | | | State | 7 | Zip Code | |
| The business is a: Corporation LLC Partnership | | | | | □Pre | oprietorship |) | |
| Year StartedState of IncFederal I.D(EIN).#: | | | | | | | | |
| Web Site Address: Dun & Bradstreet # | | | | | | | | |
| *If you are tax exempt in the state of Arizona please include a current & signed AZ Form 5000 or 5000a | | | | | | | | |
| resale certificate with this application, American Hose LLC requires this to be updated yearly* | | | | | | | | |
| | 7 | | D: :: //6 | | 1.1. | | | |
| The business is a: ☐ Subsidiary ☐ Division (if yes, check which) | | | | | | | | |
| Parent Company Name: Address City: State: Zip: | | | | | | | | |
| • | | | | | | - | D: | |
| Do you require a purchase order# before we accept an order? \Box Yes \Box No | | | | | | | | |
| A/P ContactA/P Email | | | | | | | | |
| A/P Phone Estimated Monthly Purchases. \$ | | | | | | | | |
| Terms Requested: □COD □ Credit Card □ Net30 terms | | | | | | | | |
| Credit Limit Requested \$ | | | | | | | | |
| Check one: | Principal | ☐ Partner | $\Box P_1$ | roprieto | or | | | |
| Name: | Social Security# | | | | | | | |
| Home Address: | | | | | | | | |
| Home Phone: | | Mobile # | | | Email | | | |
| Bank References | | | | | | | | |
| Name | | Contact Name | | | Phone No | | | |
| Street Address | | City, State, zip Code | | | Date Opened | | | |
| Type of Account | Checking No. | | Saving No. | | | Loan No | | |

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Trade References (Major Supplies)

| 1. Name | Contact Name | Phone # | | | | | |
|--|--|--|--|--|--|--|--|
| | | Email: | | | | | |
| | | | | | | | |
| Street Address | City, State, Zip Code | Account No. | | | | | |
| 2. Name | Contact Name | Phone # | | | | | |
| 2. Name | Contact Name | Email: | | | | | |
| | | Zinan. | | | | | |
| Street address | City, State, Zip Code | Account No. | | | | | |
| | | | | | | | |
| 3. Name | Contact Name | Phone # | | | | | |
| | | Email: | | | | | |
| G | | | | | | | |
| Street Address | City, State, Zip Code | Account No. | | | | | |
| Vou rangeant you are an authorized rangea | ntative with authority to enter into this a gree | ment and the information contained in this | | | | | |
| You represent you are an authorized representative with authority to enter into this agreement and the information contained in this | | | | | | | |
| Application and any attachment is true, correct and complete. You consent to American Hose LLC obtaining information both | | | | | | | |
| business and personal from credit reporting agencies and other sources American Hose LLC deems appropriate in considering this | | | | | | | |
| Application. If credit is extended, you agree to be bound by all the terms and conditions set forth by American Hose LLC. Standard | | | | | | | |
| terms are NET30. Any invoices over 30 days past due are subject to 3% late fee and possible suspension of terms going forward. | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Signature | Date Title | | | | | | |

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