

Griffith Electric Supply Co., Inc. 5 Second Street Trenton, NJ 08611

Tel: 609-695-6121 Fax: 609-695-7608 E-Mail: jkennedy@griffithelec.com

	Company Name			
Aailing Address:				
rincipal's Name	Title and Position	Federal ID. N (Corp./Partners)	No.	Social Security No. (Sole Proprietor)
elephone:	Fax:	E-N	Mail:	
low Long In Business:	Credit Line Re	quested: Type	of Business:	
Accounts Payable Conta	act Name and Phone Numb	er		
Credit References (<u>Pleas</u>	se Complete all items includ	ing fax numbers)		
Jame of Company	Contact Person	Telephone	Fax	
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Bank References (Please Name of Bank	e complete all items) Type of Accou	nt and Account Number	Conta) nct Person
Bank References (Please Name of Bank Street, City, State, Zip Customer Agreement: I agre harge equal to 1.5%. If leg-	e complete all items) Type of Accounts Type to abide by your payment term	nt and Account Number	Conta) nct Person er subject to a monthly service
Bank References (Please Name of Bank Street, City, State, Zip Customer Agreement: I agree tharge equal to 1.5%. If legitor such collection. If the credit customer is a co	Type of Account terms at action ever becomes necessary appropriation, then by signing below	nt and Account Number as of 1% 10 th Prox, Net 30 th . All p	Conta () Phone Number of the part of th) nct Person er subject to a monthly service by reasonable attorney's fees ersonally guarantees