



COMMERCIAL WAREWASHING,  
CLEANING & LAUNDRY PRODUCTS

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25 Commercial Drive, Unit 3A - Brentwood, New Hampshire 03833

**Application for Open Account with:**

Business Name: \_\_\_\_\_ D/b/a: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_ Email: \_\_\_\_\_  
Years In Business: \_\_\_\_\_ Date: \_\_\_\_\_

**TAXPAYER IDENTIFICATION NUMBER:**

**Tax Status (complete one section)**

**Individuals:** Individual's Name \_\_\_\_\_  
Individual's Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Sole Proprietor:** Business Owner's Name \_\_\_\_\_  
Business Owner's Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Business or Trade Name \_\_\_\_\_

**Partnership:** Name of Partnership \_\_\_\_\_  
Partnership's Identification Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Corporation, Exempt Charity, or other entity:**  
Name of Corporation or Entity \_\_\_\_\_  
Employer Identification Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**BANK REFERENCES:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

**CREDIT REFERENCE:**

- |    |       |         |           |
|----|-------|---------|-----------|
| 1. | _____ | _____   | _____     |
|    | Name  | Address | Telephone |
| 2. | _____ | _____   | _____     |
| 3. | _____ | _____   | _____     |

I agree to pay Summit Supply according to the terms specified. I agree to a monthly service charge on past due accounts at 1½ % per month. Any checks that do not clear the bank are subject to a charge plus any cash discount earned. I agree to pay all costs of collection, including attorney's fees, should legal action become necessary. I warrant that all information furnished herein is true and will personally guarantee all debts incurred by the above company.

[Print Name] \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_