

# CREDIT INFORMATION FORM – CONFIDENTIAL



**McCrudden**  
HEATING SUPPLY

McCrudden Heating Supply: 523 Williamson Ave., Youngstown, OH 44502  
330-744-4108 • FAX: 330-744-5665

## Office Use Only

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Limit: \_\_\_\_\_

Letter Sent: \_\_\_\_\_

Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Phone No. \_\_\_\_\_ Company Fax No. \_\_\_\_\_

Please Check:  Owner Federal ID# \_\_\_\_\_  Taxable  Exempt  
See note below\*

Partnership Name of Partner: \_\_\_\_\_

Years In Business: \_\_\_\_\_  Corporation Name of Partners: \_\_\_\_\_

**\*If your business is exempt, please include a copy of your tax exemption certificate**

Owner Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone No. \_\_\_\_\_ Social Security No. \_\_\_\_\_ Does your company require:

Please check all that apply:

Name of Bank: \_\_\_\_\_  Purchase Orders  Job Names  Job Numbers

Address of Bank: \_\_\_\_\_

Bank Phone No. \_\_\_\_\_ Checking Account No. \_\_\_\_\_ Savings Account No. \_\_\_\_\_

**References:** Please include company name, address and phone number:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

In consideration for the extension of credit to the above, the undersigned personally guarantees the payment of this account and waives notice of non-payment and demand.

Applicant's Signature: \_\_\_\_\_ Individually: \_\_\_\_\_

You must have a heating and cooling contractor's license in order to purchase heating and air conditioning equipment and parts.

REV. March 2014