



Piscitello's Home Center
2300 Wood Ave. - Easton, PA 18042
610-258-0441
www.piscitellos.com
info@piscitellos.com

Employee # _____

Confidential Credit Application

Company Name: _____
 Email: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Phone Number: _____ FAX: _____
 EIN #: _____
 Organizational Structure: Corporation _____ Individual _____ Non-Profit _____ Partnership _____
 Approximate annual spending? _____ (this will place you in a pricing program)
 Company Owners/Officers:

Name: _____
 Home Address: _____

 Cell #: _____
 Office #: _____
 Title: _____

Name: _____
 Home Address: _____

 Cell #: _____
 Office #: _____
 Title: _____

Would you like your statements emailed or printed? Emailed _____ Printed _____

Please check for a cash only account (if charge- customer statements will be mailed 1st of the following month)

Company Information:

Date of entering business: _____
 State & Date of incorporation: _____
 Type of business: _____
 How long has the business operated at its current address? _____
 Do you claim State Sales Tax Exemption? _____
If yes, a signed copy of a State Sales Tax Exemption Certificate must be attached

Would you like your charges/transactions emailed after each purchase? Yes _____ No _____

Would you like job names to be required on each purchase? Yes _____ No _____

List of names permitted to charge on account:

Has your company or any of the principals ever filed for bankruptcy? Yes _____ No _____

Have you or your company ever had judgements or liens placed against you? Yes _____ No _____

If yes, please detail: _____



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I, OR WE, DO HEREBY AGREE TO THE FOLLOWING TERMS AND GUARANTEES:

A monthly statement will be issued to each customer after the last business day of each month. The statement will show a listing of debits and credits for the current month and an aging of past due balances. The following terms apply to payment of our statements:

1. Piscitello's Home Center will not accept any form of payment which contains any limitations or conditions on payment such as short paid checks noted as representing payment in full of a disputed balance.
2. Failure to pay a statement's amount due on or before the last business day of the month will result in a charge of 2% on all outstanding balances as well as current orders being held. Failure to pay promptly will further result in the customer's credit account being held/canceled.
3. By signing this application, you agree to allow Piscitello's Home Center to verify your bank and business references.
4. In the event that it is necessary for Piscitello's Home Center to institute legal action in order to collect any delinquent balance, the customer shall be responsible for all reasonable costs of collection including attorney's fees.
5. You agree that any person signing this application on your behalf has the actual authority to do so, and to bind you to the terms and conditions listed above

Authorized Signature _____ Title _____
 Print Name _____
 Company Name _____
 Date _____

Personal Guarantee

I, we, or all of us hereby agree as guarantors, the guarantee and to be responsible and liable to pay Pisci's Inc., DBA Piscitello's Home Center for any and all indebtedness now or hereinafter owing to Piscitello's Home Center by the above named individual, partnership, or corporation. I, we, or all of us further agree that without notice, said indebtedness or credit may be changed in form and terms of payment and the same shall be covered with this guarantee, and that no change of partnership or ownership shall affect this guarantee, until Piscitello's Home Center is notified in writing of the intent to no longer be held as guarantors of future purchases.

Guarantor's Signature _____
 Print Name _____
 Date _____
 Guarantor's Signature _____
 Print Name _____
 Date _____

Please forward completed applications to: info@piscitellos.com

NET 15TH OF THE FOLLOWING MONTH
 CREDIT CARD PAYMENTS FOR STATEMENT BALANCE WILL BE
 SUBJECT TO 3% PROCESSING FEE