



Essco • 1933 Highland Rd. Twinsburg, OH 44087
Phone - 216.524.4141 Fax - 216.524.4142

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Company Name: _____
Billing Address: _____
City _____ State _____ Zip _____
Description of Business: _____
Phone: _____ Fax: _____ Email: _____
Resale # _____ (send with application) Date Business Established: _____
Sole proprietorship: Partnership: Corporation: Other: _____
Owner, Partner or Officers
Name: _____
Address: _____ City _____ State _____ Zip _____
Phone # _____ Cell Phone # _____ Email: _____

CREDIT INFORMATION

(for **Credit Card Terms** - Skip this section and complete the Credit Card Authorization Form)

Type of Credit desired: COD - Company Check Open Account Credit Card
Estimated monthly purchases with Essco: _____
Bank Name _____
Bank Address: _____ City _____ State _____ Zip _____
Bank Phone # _____ Bank Fax # _____
Checking _____ Account number _____
Savings _____ Account number _____
Owner, Partner or Officers:
Name: _____
Address: _____ City _____ State _____ Zip _____
Social Security # _____ Phone # _____ Email: _____

BUSINESS / TRADE REFERENCES

(must be filled out for COD-Company Check or Open Account Terms)

Company Name: _____
Address: _____
City _____ State _____ Zip _____
Phone: _____ Fax: _____ Email: _____
Company Name: _____
Address: _____
City _____ State _____ Zip _____
Phone: _____ Fax: _____ Email: _____
Company Name: _____
Address: _____
City _____ State _____ Zip _____
Phone: _____ Fax: _____ Email: _____



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What Type of Dealership are you?

- Established Dealer
- Start Up Dealer
- Internet/Ecommerce Dealer

Which product categories are you interested in? (check all that apply)

- Vacuum Equipment
List Brands of Interest _____
- Vacuum Parts
- Vacuum Accessories
- Air Purifiers
- Cleaners/Spot Removers
- Home Care
- Other _____

Website domain or ecommerce name _____

How did you hear about Essco? _____

Who do you currently buy from? _____

Essco Salesperson helping you? _____

Would you like website access? Yes No If so what would you like to use as a password _____

AGREEMENT

1. By Submitting this application, I authorize Essco to make inquiries into the banking and Business/trade references that I have supplied.
2. Having applied for credit with Essco, I agree to maintain my account according to the payment terms established and I will remain liable for any collection or interest costs should my account become delinquent.
3. This Agreement shall be construed and interpreted and the rights of the parties determined in accordance with the laws of the State of Ohio. Any suit, action or other legal proceeding arising out of this Agreement shall be brought in a court of competent jurisdiction located within Summit County, Ohio. Each party hereto waives all rights to trial by jury of any claims of any kind arising under or relating to this Agreement.

Signature _____
Title _____

Print Name _____
Date _____

The undersigned person, jointly and severally with the business organization applying for a business account, guarantees to Essco for its benefit and the benefit of its administrators, successors and assigns the full and prompt payment of all amounts payable to Essco.

Jointly and severally

Signature _____ Print Name _____
Date _____