AMERICAN PRODUCERS SUPPLY
Industrial, Construction and Oil Field Supplies

Marietta, OH
119 Second St
(740) 373-5050

Columbus, OH
590 N Hague Ave
(614) 272-1113

Sunbury, OH
6914 St Rt 37E
(740) 362-7249

Lancaster, OH
1806 Victor Rd
(740) 654-3711

Cincinnati, OH
10770 Kenwood Rd
(513) 791-4252

Portsmouth, OH
1763 10th St
(740) 354-3479

Ferdinand, IN
2130 Industrial Park Rd
(812) 998-2130

Huntington, WV
333 Washington Ave
(304) 525-3545

St. Albans, WV
2822 Winfield Rd
(304) 755-0009

Pittsburgh, PA
7724 Edgewood Ave
(412) 220-2370

Louisville, KY
520 South 15th St
(502) 583-3875

Glasgow, KY
129 Beaver Trail
(270) 861-0060

Wixom, MI
30270 Beck Rd
(248) 669-4040

Company or Owner Name _____

DBA (if different) _____

Billing Address _____ Shipping Address _____

City _____ State Zip _____

Phone _____ Fax_____ No. of Employees _____

Purchasing Agent _____ Accounts Payable Contact _____

Do you prefer invoices to be ☐ Emailed Email Address_____

☐ Faxed Fax number _____

Purchase Order required? ☐ Yes ☐ No Fed ID/Social Security number _____

Amount requested $_____ Type of Business _____

Number of years in business _____ Briefly describe what products or services you produce or supply

_____

Types of products you plan to purchase _____

Special shipping instructions (such as receiving hours, preferred carrier, specific location on site, etc.) _____

_____

Are you a: ☐ Sole Proprietorship ☐ Partnership ☐ Corporation Date Incorporated _____

Names, titles, and address of partners/owners OR three corporate officers:

_____

_____

_____

Are you sales tax exempt? ☐ Yes ☐ No **If yes, please provide appropriate form(s)**
Have you had credit with us before? ☐ Yes ☐ No Have you ever filed Bankruptcy? ☐ Yes ☐ No

If yes, under what name?

_____

Do you use authorized purchasers? If so, please list _____

_____

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I represent that the above information is true and is given to induce American Producers Supply, Inc to extend credit to the applicant. My company and I authorize American Producers Supply to make such credit investigation as they see fit, including contacting the below trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to American Producers Supply any and all information concerning the financial and credit history of my company and myself. I have read the terms and conditions stated below and agree to all of the terms and conditions as required to establish a credit account with American Producers Supply Company, Inc.

Signature of officer or owner_____ Date_____

Printed name_____ Title_____

Reference #1 Name _____

Address _____

Phone _____ Fax _____

Reference #2 Name _____

Address _____

Phone _____ Fax _____

Reference #3 Name _____

Address _____

Phone _____ Fax _____

GENERAL TERMS AND CONDITIONS

1. Tax Exempt forms, if applicable, are required to be kept on file for the appropriate state. If any product is “picked up” in our storeroom, regardless of business location and OH form is required. Blank state tax-exempt forms are available by calling our credit department.
2. All invoices become payable based upon the terms stated on the invoice and if not paid within those terms, the amounts will be considered past due.
3. A service charge of 1.5% per month will be added to all past due amounts.
4. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department
5. In the event the account is referred for collection, my company agrees to pay all costs of collections, including court costs and reasonable attorney’s fees. Washington County and the State of Ohio shall hold jurisdiction in all legal matters involving American Producers Supply Company, Inc.
6. Any check returned for non-sufficient funds will be charged back to the account with an additional fee for bank charges of $20.00. NSF checks may lead to the accounts being placed on COD.
7. Returns must have prior approval (a RGA) and may be subject to a restocking fee and shipping charges except in the case of defective items or parts shipped in error.

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INDIVIDUAL PERSONAL GUARANTY

DATED_____, _____

I, _____, residing at _____ (hereinafter referred to as I, me and/or myself) for and in consideration of American Producers Supply Company, Inc of 119 Second Street, Marietta, Ohio, 45750 (hereinafter referred to as you or your) extending credit at my request to _____ (hereinafter referred to as Company) hereby personally guarantee to you the payment of any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity of such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice thereof and consent to any modification of renewal of the credit agreement hereby guaranteed.

This is an absolute, unconditional and continuing guarantee and will remain in full force and effect so long as any sums are owed to you by the Company or myself.

With or without notice to me, you, in your sole discretion, may apply all payments from the Company, from me, or from any other guarantor under this or any other instrument, or realized from any security, in such manner and order or priority as you see fit, to any obligation of the Company, whether or not such obligation is due at the time of such application.

This guaranty shall be subject to and interpreted under the laws of the State of Ohio.

Should any one or more provisions of this guaranty be determined to be illegal or unenforceable by a court of competent jurisdiction, all other provisions shall remain effective.

This guaranty shall inure to the benefit of you, your successors and assigns. It shall be binding on my legal representatives and me. If this guaranty is signed by more than one person, the obligations here under will be joint and several.

_____ _____

Signature Printed Name

Witnessed:

_____ _____

Signature Printed Name

Sales Associate:_____ Branch:_____

Ph:_____