



## Credit Application

PO Box 81592  
Chamblee, GA 30366-1592  
Phone: (770) 455-9756  
Fax: (770) 458-5075

**To be considered for credit, you must complete both pages of this form.**

Exact Legal Name: \_\_\_\_\_

DBA (if applicable): \_\_\_\_\_

<b>Bill To</b>	Street Address:	_____
	City, State, Zip:	_____
	Phone:	_____
	Fax:	_____
<b>Ship To</b>	Street Address:	_____
	City, State, Zip:	_____
	Phone:	_____
	Fax:	_____
	County:	_____
<b>Terms:</b>	Billing terms are 2% 10th--Net End of Month. All delinquent accounts are subject to a service charge of 1.5% per month (APR 18%).	

As part of the application process, ACS of GA will access a Business credit report on your company. ACS of GA will also access a personal credit report on the principal of the business if one of the following conditions apply:

1. The owner of a sole proprietorship or a partner in a partnership
2. An officer in a corporation if the corporation has been in business less than one year
3. No Equifax Commerical Business Report exists regardless of time in business

The information below **MUST** be completed.

### Owner Information

Owner Name: \_\_\_\_\_  
Home address: \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Social Security #: \_\_\_\_\_  
Driver's License # \_\_\_\_\_  
State Issued \_\_\_\_\_

I understand that by signing below I am authorizing ACS of GA to obtain a copy of my personal credit report for use in processing this Application for Service.

Signature \_\_\_\_\_

Date \_\_\_\_\_

<b>Organization Type</b> (check one)	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation
Organization Details:	_____		
Federal Tax ID#	_____		

Does your organization use purchase orders?

**Sales Tax Options:** (select one)

- No tax on any items purchased\*
- No tax on typical exempt items (see below)\*
- Tax on all items purchased

**\*NOTE:** Sales tax options are the sole responsibility of the account. If you are a typical body shop or production facility, the State will tax items that do not leave with (become a part of) the vehicle / end product. Some examples of "taxable" items are: sand paper, masking tape, masking paper, tack cloths, spreaders, tools, etc. Examples of "exempt" items are: paint, clears, sealers, primers, additives, reducers, fillers, etc. If in doubt, seek council from an accountant or a representative at the State Department of Revenue. ACS will not be held responsible for the choice you make regarding sales tax; we simply want to point out the options we have available.

\*State Sales Tax I.D. Number: \_\_\_\_\_

Signature: \_\_\_\_\_

**Trade References:**

Please list four trade references. NOTE: ACS does not accept bank references or other paint jobbers as valid trade references.

1	Company Name: _____
	Address: _____
	Phone: _____ Fax: _____
	Contact: _____ Customer Since: _____
2	Company Name: _____
	Address: _____
	Phone: _____ Fax: _____
	Contact: _____ Customer Since: _____
3	Company Name: _____
	Address: _____
	Phone: _____ Fax: _____
	Contact: _____ Customer Since: _____
4	Company Name: _____
	Address: _____
	Phone: _____ Fax: _____
	Contact: _____ Customer Since: _____

**Company Banking Information**

Bank Name: _____	Name(s) Listed on Account: _____
Account Number: _____	_____
Routing Number: _____	_____

**Applicant further agrees:**

I have read and I guarantee as an officer, owner or authorized signee of this company, and in signing I personally guarantee: full and punctual payment for all purchases charged to this account by employees of this company and likewise payment of any collection costs and attorney's fees which may become due ACS of Georgia, LLC. because of failure to comply with the terms of this agreement or with any costs and fees incurred in the collection of any check returned to ACS of Georgia, LLC. as non-negotiable.

If any litigation arises between or among ACS of Georgia, LLC, purchaser, and/or guarantor(s), regardless of whether other parties are involved, then ACS of Georgia, LLC, purchaser, and/or guarantor(s) stipulate and agree that: 1) venue shall lie exclusively in the state courts of Dekalb County, Georgia; and, 2) the laws of the state of Georgia shall controll substantively and procedurally, unless otherwise prohibited by law.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(company officer or company authorized signatory)

Printed Name and Title: \_\_\_\_\_

<b>Office Use Only</b>	County: _____
Price Profile: _____	Terms: _____
Credit Limit: _____	All Fields Complete? _____
Special Instructions: _____	