

Gypsum By McCarthy 2625 S. Salina Street Syracuse, NY 13205



PH: 315-478-6169 Fax: 315-478-2903

DATE:		Salesperson:	
Physical Address:		Fax:	
City/State/Zip:		E-mail Address:	,
Mailing Address If Different:			
Number of Years at the Above Na Years of Operation Under This Na			_ -
Are You: Individual Owner SSN or EIN #:	Partnership	Corporation	(Please Circle one)
If Incorporated - Date of Incorporation		State Incorp	porated In:
Corporation Attorney's Name and	Address:		
Corporation Accountant Names a	nd Address:		
	OWNER, PAR	TNER, PRESIDENT INFO:	
1) Full Name:		Postion	:
Home Address:			
City/State/Zip			<u> </u>
Home Phone:		Cell Phone	

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Full Name Home Ade			Postion	·
поппе Аи				
City/State			County	•
Hone Pho			Cell Phone	:
SSN #:			F-mail	:
			_	
Bank Nam	ne:			Acct No:
	ress/Branch			
Phone Nu	ımber:		Contact:	
		Credit Reference	es (four are requested)	
<u>Name</u>		<u>Address</u>	<u> </u>	FAX Number:
Are there	any judgments o	or legal proceedings pendin	g or threatened against v	νου?
		r regar proceedings pendin		
		_		
Any check	ks issued within t	he past 6 months which we	ere not paid due to insuff	ucient funds for any reason:
		A		
		s) ever done business with		de au Cuadite
If so under what name(s)? Cash or Credit:				on or credit:
CREDIT AI	PPLICATION to G	ypsum by McCarthy FROM		
1)	I/WE authorize	you to contact all bank, cr	edit and trade references	s to verify our credit standing
	with them and	authorize them to release	said information to you.	
2)	I/WE understa	nd your terms are 2% 10th	(excluding tax)/Net 20th	EOM and invoices past due are
	subject to 1.5%	6 service charge per month	. Discounts are date driv	en bu the document date.
3)	If it becomes n	ecessary to effect collectio	n, I/WE agree to pay all o	osts of collection including
	reasonable cou	urt costs and attorney fees.		
4)	In consideratio	n of Gypsum By McCarthy	extending credit, I/WE jo	intly and severally do
	personally gua	rantee unconditionally, at a	all times, to Gypsum By N	AcCarthy, Inc. its successors
	and/or assigns,	, the payment in indebtedn	ess of balance of indebte	edness of the within named firm.
	Print Name			Signature
	Print Name			Signature
	Print Name			Signature
	Print Name			Signature
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			Dated	_