



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 \_\_\_\_\_  
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## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

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 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.

Signature \_\_\_\_\_

Printed \_\_\_\_\_

Title \_\_\_\_\_