



**A 2 Z Educational Supplies**

10831 Woodegde Dr ■ Houston, TX 77070 ■ phone: 281-890-6615  
db@a2zedsupplies.com ■ fax: 281-894-0160

**ACCOUNT APPLICATION**

Name of Firm: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Ship to Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_

FAX: (     ) \_\_\_\_\_

Corporation \_\_\_\_\_ Subsidiary \_\_\_\_\_ Division \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor \_\_\_\_\_

If Subsidiary or division, name of parent company:

\_\_\_\_\_

DUNS # \_\_\_\_\_ Resale # \_\_\_\_\_ Tax I.D. # \_\_\_\_\_

*Please attach copy of your tax exempt or resale certificate.*

Nature of business: \_\_\_\_\_

Annual Sales: \_\_\_\_\_ Year Established: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

\_\_\_\_\_  
President (or Partner)

\_\_\_\_\_  
Vice-President (or Partner)

\_\_\_\_\_  
Sec.-Treasurer (or Partner)

**Three Trade References:**

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Bank Reference:**

Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Officer: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Authorized Buyer(s): \_\_\_\_\_

Purchase Order Required? Yes No Monthly Credit Desired? \_\_\_\_\_

Accounts Payable Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Account Payable Email: \_\_\_\_\_

By executing this application, applicant(s) hereby authorize(s) seller to investigate applicant(s) credit record / history and financial responsibility and further authorizes seller to furnish information regarding applicant(s) performance of this agreement to a proper credit reporting agency and such others who are entitled to receive said information in compliance with the Fair Credit Reporting Act, 16 USC Sec 1681, et. Seq.

Applicants will be billed for each purchase made on the account. Any amounts billed and not paid within the terms stated on the invoice will be considered past due. Past due amounts will be subject to a FINANCE CHARGE OF 1.5% per month (ANNUAL PERCENTAGE RATE OF 18.0%). All returned checks are subject to a \$25.00 service charge. Collection of finance charges and service charges in no way alters the seller's rights to seek other remedies allowed by law or in equity.

In the event that applicant fails to pay the entire balance on the account when due, seller may declare the account to be in default and without further notice or demand, exercise all rights and remedies available by law for the collection of the balance due on the account. In the event of default, applicant will be liable for all expenses of collection, with or without suit, including but not limited to all court costs and attorney fees, to the extent allowed under applicable law.

The undersigned certifies that he has read and understands all the terms and conditions set forth herein and agrees to be bound by the same in the event that any credit is extended pursuant this agreement.

The undersigned further certifies that the above information is accurate and complete and that a true and correct copy of the foregoing application containing the disclosures, terms and conditions applicable to this transaction has been furnished.

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

Date: \_\_\_\_\_

**Invalid Without Signature**

**For office use only:**

**Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_ Credit Amount: \_\_\_\_\_**

**Account Number: \_\_\_\_\_**

Please E-Mail, Fax, or Mail Completed Applications to:  
A 2 Z Educational Supplies  
10831 Woodedge Drive  
Houston, TX 77070  
Attn: Credit Application  
  
(281) 894-0160 FAX  
(281) 890-6615 Phone  
info@a2zedsupplies.com