

REVCO[®]
inc.
LIGHTING + ELECTRICAL SUPPLY
P.O. Box 1539, Southampton, NY 11969

Dear Customer,

The enclosed credit application must be filled out entirely in order for it to move quickly through the processing phase. Please note the following while filling out your application:

1. The business address under "Business Information" must be the physical address.
2. The "Information for Proprietor, Partners or Officers" section needs to be filled out.
3. Please provide the phone number of your local bank branch, no 800 numbers please.
4. Please sign the guarantee of payment on both sets of lines at the end of this application.

To return your completed credit application, please choose one of the following delivery methods:

- By mail:
REVCO Lighting and Electrical Supply, Inc.
Attn: Credit Department
P.O. Box 1539
Southampton, NY 11969-1539
- By fax:
631-283-0568
- By e-mail:
jeanette@revcoelectric.com

If there are any questions, please feel free to call us at 631-283-3600.

Sincerely,

Revco Lighting and Electrical Supply, Inc.

360 County Road 39A Southampton, NY 11968
403 Griffing Avenue Riverhead, NY 11901
50 Gingerbread Lane East Hampton, NY 11937
55765 Main Road Southold, NY 11971
323B Route 25A Miller Place, NY 11764

T. 631-283-3600 F. 631-283-0568
T. 631-369-1900 F. 631-369-1904
T. 631-329-4600 F. 631-329-2429
T. 631-765-6600 F. 631-765-3730
T. 631-509-6340 F. 631-509-6344



LIGHTING + ELECTRICAL SUPPLY
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Phone: 631-283-3600

Fax: 631-283-0568

CREDIT APPLICATION

BUSINESS INFORMATION:

Name of Business: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Type of Business (Check One): Corporation ___ Proprietorship ___ Partnership ___ Self ___

Tax/Federal ID#: _____ Year Established: _____

If Incorporated: State of Incorporation: _____ Date: _____

Nature of Business: _____ Last Year Gross Sales: \$ _____

Business Property (Check one): Leased ___ Owned-Mortgage held by: _____

Telephone Number: _____ Cellular Phone: _____

Billing email: _____ Invitation email: _____

Electrician's License Number: _____ Date: _____

Driver's License Number _____

Have you filed business or personal bankruptcy within the last 5 years?

Yes: ___ No: ___ If Yes Date _____ Explain: _____

Has a tax lien been filed against your company or individual owners in the last 5 years?

Yes: ___ No: ___ If Yes, Date _____ Explain: _____

BILLING INFORMATION:

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Accounts Payable Contact Person: _____ Phone Number: _____

Tax Status (Check one): Taxable: ___ Exempt* ___

ATTACH APPROPRIATE SIGNED CERTIFICATE



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INFORMATION FOR PROPRIETOR, PARTNERS OR OFFICERS

1. Name: _____

Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ (Check one) Owned: _____ Rented: _____

Mortgage Holder: _____

Date of Birth: _____ Social Security: _____

2. Name: _____

Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ (Check one) Owned: _____ Rented: _____

Mortgage Holder: _____

Date of Birth: _____ Social Security: _____

3. Name: _____

Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ (Check one) Owned: _____ Rented: _____

Mortgage Holder: _____

Date of Birth: _____ Social Security: _____



LIGHTING + ELECTRICAL SUPPLY
P.O. Box 1539, Southampton, NY 11969

BANK REFERENCE:

Name of Bank: _____

Bank Address: _____

City: _____ State: _____ Zip Code: _____

Contact: _____ Title: _____

Telephone Number: _____ Fax Number: _____

ACCOUNT NUMBER: _____ Account Type: _____

ACCOUNT NUMBER: _____ Account Type: _____

TRADE REFERENCES:

Contact 1

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Fax Number: _____

Contact 2

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone number: _____ Fax Number: _____

Contact 3

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Fax Number: _____



AMOUNT OF CREDIT REQUESTED: _____

CREDIT NEEDS (Check one) special project: _____ ongoing account: _____

OUR AGREED CREDIT TERMS ARE:

- 1. Payment is due in accordance with the terms of sale as shown on our invoice, (Terms are 1% discount if payment is received by the 10th of the month/Net due on the 25th)
2. A service charge of 2% per month will be imposed on all past due balances.
3. Purchaser will be held responsible for payment of all attorneys fees and court costs on all due accounts placed for collection with an attorney.

GUARANTEE OF PAYMENT:

The undersigned agrees that should credit be granted from Revco Lighting and Electrical Supply, Inc to the above mentioned credit applicant, the undersigned will be responsible for all invoices presented. Accounts are due and payable in accordance with the terms stated, It is understood that the undersigned will pay all cost of collection, including reasonable attorney's fees of thirty three and one third percent. The account is payable to Revco Lighting and Electrical Supply, Inc. I (we) certify the information provided on this application to be true and accurate.

Signature Title Date

Signature Title Date

Print Name

Print Name

In consideration of your company, its affiliates or subsidiaries, selling various products and/or services to the credit applicant(s), I (we) the undersigned unconditionally, jointly and/or severally guarantee and my-self (ourselves) personally responsible to your company and/or your successors or assignees for the performance and payment, when due, of all sums that may, for any reasons or purpose, be duo or become due to you from the various products and/or services from your company, whether evidence by open account, promissory note or any other form of indebtedness. I (we), hereby waive notice of acceptance hereof of amount of sales, date of shipment or delivery, and default in payment, protest or notice or protestor any notice of any other evidences of indebtedness and notice of non-payment thereof, I (we), further waive all requirements of legal proceedings that could have been taken against purchaser. Upon demand from you, I (we) will pay you immediately any and all sums due or to become due in event of default by purchaser. Should legal action be instituted against purchaser, I (we) agree to pay any and all late fees, costs of collection and reasonable attorneys fees of thirty three and one third percent. Any release of purchaser from obligation shall not release me (us) except to the extent of payment received by you from purchaser in consideration for release, I (we) intending to be legally bound, have signed this personal guarantee on the date written,

Signature Title Date

Signature Title Date

Print Name

Print Name



Bank Account Inquiry Authorization

To whom it may concern,

I hereby give permission to release basic information regarding my bank accounts to REVCO Lighting and Electrical Supply, Inc. The information provided by my banking institution is for the express purpose of REVCO Lighting and Electrical Supply, Inc.'s Credit Department use.

Signature: _____

Print Name _____

Company _____

Date _____

360 County Road 39A Southampton, NY 11968 403
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T. 631-509-6340 F. 631-509-6344



Dear REVCO Customers,

HELP...

us protect you... From time to time we try to update our purchasing records, for your protection and for ours as well. If you would, please let us know whom within your company is authorized to make REVCO purchases. Please fax this form to 631- 2830568; Attention A/R, or e-mail [to ar@revcoelectric.com](mailto:to_ar@revcoelectric.com). Thank you very much for your help with this!

*Authorized purchasers include:

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

We will allow your agents (persons listed above) to purchase from us on your behalf indefinitely, or until you state otherwise in writing. Please let us know immediately, when you make any changes to your authorized purchasing staff, to protect you from the possibility of fraudulent purchasing.

Company Name: _____ Customer Number: _____

Authorized Company Representative Signature: _____

Print Name _____ Title: _____ Date: _____

Thank you very much for your help and we look forward to enjoying continued success with you.

Sincerely,

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inc.
LIGHTING + ELECTRICAL SUPPLY
P.O. Box 1539, Southampton, NY 11969

Dear Customer,

In our effort to save energy and resources, Revco's bills are delivered electronically. Please provide your e-mail address in the space provided and check off which documents you would like to receive.

Thank you!

_____ Invoices

_____ Statements

_____ Newsletters

_____ General Announcements

E-mail Address: _____

Company Name: _____

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Griffing Avenue Riverhead, NY 11901 50
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