



copiesatcarson, inc.

# Commercial Account Application

1315 East Carson St.

Pittsburgh, PA 15203

T: 412.481.4875

F: 412.481.4890

Company: \_\_\_\_\_

DBA  
if different: \_\_\_\_\_

Address(please no P.O. Box): \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Head Qtr.  
Address if  
different: \_\_\_\_\_

Federal  
Tax ID#: \_\_\_\_\_ Tax Exempt (*please attach documentation*)    
yes no

Are You A: \_\_\_\_\_ Corp. \_\_\_\_\_ Prtrnrshp. \_\_\_\_\_ Sole Prprtrshp. \_\_\_\_\_

Type of  
Business: \_\_\_\_\_ Years in Business \_\_\_\_\_

Authorized  
Purchasers: \_\_\_\_\_

Accounts  
Payable  
Mgr.: \_\_\_\_\_ Phone# and Ext.: \_\_\_\_\_

Trade (*Please do not list utilities, credit cards, loans, leases, etc.*)

References: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Authorized  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*I have read the terms and conditions printed on the reverse side and agree to abide by them.*

## Terms and Conditions

I represent that the above information is true and given to extend credit to the applicant. The organization listed above authorizes Copies at Carson, Inc. to make such credit investigations, including contacting above trade references. The organization listed above authorizes trade references and credit-reporting agencies to disclose information concerning the financial and credit history of the organization listed above.

**All bills become payable in full upon receipt.**

**A service charge of 1.5% per month will be added to all amounts billed if not paid within thirty (30) days of receipt.**

**No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.**