



Accounting Office
 4921 Highway 58
 Chattanooga, TN 37416
 Phone: 423.899.6306 x 118
 Fax: 423.892.1744
 lharris@eldershardware.com

BUSINESS ACCOUNT APPLICATION

Please print neatly and legibly.

Business Name: _____

Business Address: _____

Business Phone Number: _____ Business Fax: _____

Billing Address (if different): _____

Acct. Payable Phone Number: _____ Acct. Payable Fax: _____

Contact Person: _____

TAX AND BUSINESS INFORMATION

Do you make tax exempt purchases? _____ *(If yes, please enclose a copy of your Tax Exempt Certificate.)*

Business is a (circle one): Corporation LLC Partnership Proprietorship

Business SIC Number: _____ **Type of Business:** _____

(Answer the next two questions for partnership and proprietorship only)

How long has this business been established? _____

Social Security Number of Owner(s) (proprietorships only): _____

Officers or Principals:

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Current Business Credit References:

Name: _____ **Phone & Fax:** _____

Address: _____

Name: _____ **Phone & Fax:** _____

Address: _____

Name: _____ **Phone & Fax:** _____

Address: _____

Bank Reference: _____ Phone: _____

CHARGE INFORMATION

List all persons authorized to charge on this account: _____

Special Instructions (provided by the customer): _____

(Please complete the other side of this application)

Business Name: _____

ACCOUNT TERMS

Account Terms:

1. Balance of the account is due the 10th of the month following the receipt of a statement.
2. A service charge of 1.5% is assessed for the entire balance of an account not postmarked by the 10th.
3. Charging privileges will be temporarily suspended if the credit limit is met or exceeded or the account becomes delinquent.
4. If the account is turned over for collection, you will be liable for all additional costs, fees, and penalties.
5. Any account which becomes 90 days past due will be closed.
6. Maximum initial credit limit is \$500. Please contact Ace Accounts Receivable at (423) 899-6306 ext 118 or lharris@eldershardware.com if you would like to request a higher maximum credit limit.
7. This account is valid at the following Ace Hardware stores:
 - Chattanooga** **Chattanooga**-4921 Hwy 58 ♦ **Dallas Bay**-8531 Hixson Pike ♦ **Brainerd**-5906 Lee Hwy ♦ **Dayton Blvd**-1870 Dayton Blvd ♦ **East Ridge**-3502 Ringgold Rd ♦ **Cleveland**-990 25th St ♦ **Ooltewah**-9231 Lee Hwy ♦ **East Brainerd**-8164 East Brainerd Rd ♦ **Walden**-2000 Taft Hwy ♦ **SouthSide**-2700 South Broad Street
 - North Georgia** **Rome**-1804 Turner-McCall Blvd ♦ **LaFayette**-512 S. Main Street ♦ **Ringgold**-100 Helpful Place ♦ **Chickamauga**-36 General Bushrod Johnson Ave
 - Knoxville** **Halls**-6950 Maynardville Pike ♦ **Dixie Lee Junction**-13800 Kingston Pike ♦ **Bearden**-150 North Forest Park Blvd ♦ **North Broadway**-2027 North Broadway ♦ **South Knoxville**-4219 Chapman Highway
8. **All payments should be mailed to: Ace Hardware Regional Accounting Office, 4921 Highway 58 Chattanooga, TN., 37416.**
9. We may investigate your credit records and verify your credit references. We may also report to commercial credit reporting agencies and other creditors the status and payment history of your account.
10. We reserve the right to change any term or part of this agreement by sending you a written notice before the change becomes effective. The use of your account after the mailing of a new or modified agreement will constitute your consent to the changes made.

I certify that I have read and agree to abide by all Account Terms and that all of the information provided in this application is true and complete and is made for the purpose of opening an account with Ace Hardware of Chattanooga, Inc., or one of the affiliated stores listed above. The account is to be used for the purchase of goods and services.

Dated: _____ Signature: _____ Title: _____

“Green Program”

Would you like to receive your invoices and/or statements via email? Please provide your email address

Email address: _____

Receive Invoices only Yes / No

Receive Statements & Invoices Yes / No

NOTES

Once you have completed this form, read and understood the terms and signed the form, please mail, fax or email to the Elder’s ACE Home Office. Please be sure to fax BOTH SIDES of the application, otherwise processing cannot be completed.

In most cases, account decisions are made in 3 days or less; however, our response is dependent upon receiving information from credit references.

If you have any questions about this application or future questions about your account please e-mail, call or fax the Ace Hardware Regional Accounting Office using the numbers/address listed on the front of this application.