



640 JAMES DRIVE • RICHARDSON, TEXAS 75080
 TEL: (972) 231-5351 • FAX (972) 231-2269 • 800-776-5267
 e-mail: info@evssupply.com
 website: evssupply.com

CREDIT ANALYSIS FOR NEW ACCOUNTS

Name of Firm: _____ Date: _____

Address: _____ Phone: _____

City, State: _____ Zip: _____ Email: _____

Name of Owner, Partners, or Chief Executive Officer:

BANKING REFERENCE

Name of Bank: _____

Branch Address: _____

City, State: _____ Zip: _____

Name of Bank Officer: _____

SUPPLIER REFERENCE

1. Name: _____

Address: _____

City, State: _____ Zip: _____

Fax: _____ Email: _____

2. Name: _____

Address: _____

City, State: _____ Zip: _____

Fax: _____ Email: _____

3. Name: _____

Address: _____

City, State: _____ Zip: _____

Fax: _____ Email: _____

ANTICIPATED ANNUAL PURCHASES _____

PERSONAL GUARANTEE

The undersigned hereby agrees to the terms and conditions of sale, applicable at the time of order, and further accepts personal responsibility for payment of monies due EVS for same. If at any time, for any reason, the undersigned is unable to pay for purchases when due, without prejudice to the right of EVS to immediate payment per terms of sale, the undersigned agrees to pay and authorizes EVS to bill the account a service charge monthly up to the maximum rate allowed by law. In the event it becomes necessary for EVs to incur collection cost or institute suit to collect any amount due on the account, the undersigned promises to pay such additional collection cost, charges and expenses, including reasonable attorney's fees if the account is placed in collection. I clearly understand that the information given is subject to audit and review by EVS, further that the credit extended under this application is subject to revocation.

Applicant Signature

Title _____