



**E & R Sales**  
**4800 Market Square Lane**  
**Midlothian, VA 23112**  
**1-800-234-7474**  
**Fax: 804-744-5125**

**APPLICATION**  
**FOR NET ACCEPTANCE**  
**(FORM MUST BE COMPLETE FOR PROCESSING)**

STORE NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_ BUSINESS PHONE: ( ) \_\_\_\_\_

FAX PHONE : ( ) \_\_\_\_\_

OWNER'S HOME ADDRESS: \_\_\_\_\_ OWNER'S HOME PHONE: ( ) \_\_\_\_\_

STATE RESALE #: \_\_\_\_\_ IS THIS A RESIDENCE \_\_\_\_\_ OR A BUSINESS \_\_\_\_\_ LOCATION?

BANK NAME: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

BANK ADDRESS: \_\_\_\_\_ TELEPHONE #: ( ) \_\_\_\_\_

Date business opened: M \_\_\_\_\_ Y \_\_\_\_\_ Dun & Bradstreet # \_\_\_\_\_

**PLEASE LIST 6 TRADE REFERENCES FROM WHICH YOU PURCHASE WITH NET TERMS**

**COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ **ACCT #:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ **ACCT #:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ **ACCT #:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ **ACCT #:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ **ACCT #:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ **ACCT #:** \_\_\_\_\_

I (We) agree to the TERMS and conditions of E & R Sales, Inc., requiring payment within the specified agreed to Terms of Invoice.  
 I (We) also agree to pay a 2% per month Finance Charge on all unpaid overdue balances. If my account should become delinquent and must be turned over for collection, I also agree to reimburse E & R Sales, for all collection and legal fees related to this collection action.

\_\_\_\_\_  
 AUTHORIZED SIGNATURE

\_\_\_\_\_  
 TITLE

\_\_\_\_\_  
 DATE

