



4750 Clyde Park Ave SW, Suite C, Wyoming MI, 49509
P: 616-261-4344 / F: 616-261-4883 / www.plummersdisposal.com
Portable Restroom Service and 10 – 40 Yard Roll Off Dumpsters

Application for Credit
(Commercial Only)

Business Name: _____ A/P-A/R Contact: _____

Years In Business: _____ Phone Number: _____ Email Address: _____

Tax Exempt: ____ Yes ____ No Federal ID#: _____ Credit Limit Requesting: _____

Mailing Address: _____

Corporation / Name and Address of Officers:

Business & Name:	Title:	Personal Address:	Phone#
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Bank Reference:

Name: _____ Account#: _____

Address: _____

Phone#: _____ Contact Name: _____

Trade References – minimum of 3; please supply Business Name, Contact Name, Phone Number and Email address:

- _____
- _____
- _____

Terms: Net 10, 15 or 28 days EOM, payable no later than the 30th of the month following purchase / rental.

A valid Credit Card must be on file and will be charged without notice for any Invoice(s) that fall past 60 days. Signature below will act as authorization. Also, a service charge at the annual percentage rate of 18% (monthly rate is 1.5%) will be applied to all past due accounts.

Applicant's signature authorizes Plummers Disposal to make inquires with any credit reporting agency, bank or trade reference in connection with the extension of credit requested by the undersigned. Applicant's signature attests financial responsibility, ability and agreement to pay our invoices in accordance with the above terms. Plummers Disposal may at its sole discretion and without any advance notice discontinue further extension of credit. The undersigned also agrees that in the event the account is turned over to an attorney or a collection agency for collection, the undersigned agrees to pay all attorney / collection fees and costs associated with the collection of this debt. In the event of Litigation due to collections, the venue will be either the Point of Service, or Wyoming, MI.

Printed Name: _____ Signature: _____

Title: _____ Date: _____