

Lenox · Manning

## Commercial or Non-Profit Account Application

www.ramseysmarket.com info@ramseysmarket.com

Please select the store y	ou are appl	ying to:								
			INTERNAL USE ONLY							
□ Lenox		□ Manning		Emp #:	St	tore #:				
200 N. Walnut St.	503 Wes									
Lenox, IA 50851		, IA 5145	5	Account Number:						
P (641) 333-2844	P (712) 6	555-2538								
				Credit Limit Approved:						
Type of account requested				□ Purchase order number required						
☐ Credit; credit limit requested: \$				☐ Tax exempt (please attach tax exempt certificate)						
□ Pay-at-purchase (cash, check, credit card)				, ,						
BILLING INFORMATION (REQUIRED)				DELIVERY/SHIPPING INFORMATION (IF DIFFERENT)						
Business Name				Business Name						
Duoiness Name				Business	iamo					
Address				Street Add	Street Address (No PO Box)					
7100.000					(.	10.000,				
City		State	Zip code	City			State	Zip code		
,			'					'		
Phone number	Email addr	ess for st	atements			Primary contact	name			
*Check here if you do not w	rish to receive	e-mail com	munication. We	e-mail news and	offers o	only. We never rent or	sell your add	ress.		
			ISINESS INFORI	MATION (REQ	UIRED)		Ļ			
Full legal name of business or non-profit				Years	in business	Number	of employees			
Federal tax ID number / Employer identification number				D&B number						
Type of business										
□ Corporation □ Partnership □ Proprietorship □ Other										
Describe primary business	activity:									
Describe primary business	activity.									
Is the business involved in any claim or lawsuit? $\Box$ Yes $\Box$ No										
Has the business ever filed bankruptcy? ☐ Yes ☐ No										
Is the business contemplating filing bankruptcy? ☐ Yes ☐ No										
Has the business had a repossession or judgment taken against it? $\Box$ Yes $\Box$ No										
Are there any delinquent taxes unpaid for the business? $\Box$ Yes $\Box$ No										

PRINCIPLES OF BUSINESS / NON-PROFIT								
Name:			Title:					
Name:	_		Title:					
BANKING	6 & BUSINESS REFERENCES (C	ONLY REQU	IRED FOR CREDIT APPLICAT	TIONS)				
Bank name			Contact name	Contact phone number				
Bank address	City	State	Zip code	Contact fax number				
Checking account number	Average balance (\$)		Loan account number	Current balance (\$)				
Trade reference #1			Contact name	Contact phone number				
Address	City	State	Zip code	Contact fax number				
Trade reference #2			Contact name	Contact phone number				
Address	City	State	Zip code	Contact fax number				
the application is true and accurate disclosed herein. Our firm is finar to your terms. I/we agree to pay By	ncially able to meet any comm	nitments ma past-due acc	nade to Ace Hardware and will pay your invoices according					
List of Authorized Signers  IMPORTANT: It is the account holder's responsibility to update Ramsey's Market and/or Ramsey's Ace Hardware of								
changes to authorized account users. Changes must be submitted in writing to the e-mail address listed at the top of this application.								
Persons authorized to buy on this account (required for credit accounts)								