



Meier Supply Co., Inc.



www.MeierSupply.com

Wholesale Distributors ■ Refrigeration ■ Air Conditioning ■ Heating ■ Industrial Specialties

Corporate Office

Johnson City, NY
123 Brown Street ■ 13790
P (607) 797-7700 F (607) 797-4303
(800) 418-3216

New York

Albany
20 Kairnes Street ■ 12205
P (518) 489-0010 F (518) 489-0050

Binghamton
3 Louisa Street ■ 13904
P (607) 724-2451 F (607) 724-4578

Buffalo
519 Hamburg Street ■ 14204
P (716) 853-1291 F (716) 853-1296

Middletown
530 Bloomingburg Road ■ 10940
P (845) 733-5666 F (845) 733-1145

Rochester
430 Atlantic Avenue ■ 14609
P (585) 482-3876 F (585) 482-0846

Syracuse
1043 Erie Blvd East ■ 13210
P (315) 475-3131 F (315) 474-4534

Utica
1409 Oriskany West ■ 13502
P (315) 732-4077 F (315) 732-2629

Pennsylvania

Allentown
827 N. Meadow Street ■ 18102
P (610) 437-9818 F (610) 437-4924

Altoona
2810 Pleasant Valley Blvd ■ 16602
P (814) 941-7617 F (814) 940-5650

Erie
2031 West 12th Street ■ 16505
P (814) 459-4559 F (814) 459-4585

Hanover
290 High St. ■ 17331
P (717) 630-8833 F (717) 633-7783

Harrisburg
2359 Woodlawn St. ■ 17104
P (717) 558-0828 F (717) 558-9128

Scranton
109 Middle Street ■ 18508
P (570) 346-1565 F (570) 346-5060

Stroudsburg
RR2, Box 2098, Suite 3 ■ 18360
P (570) 424-5724 F (570) 424-5915

Wilkes-Barre
12 Ruddle Street ■ 18702
P (570) 824-8779 F (570) 824-7303

Williamsport
757 Arnold Street ■ 17701
P (570) 323-4606 F (570) 323-6293

Application for Credit

Company name: _____

Bill to address: _____

City: _____ State: _____ Zip: _____

Area code/phone: _____ Fax: _____

Ship to address: _____

Individual owner Partnership Corporation Years in business _____

If a corporation, please list the names and titles of officers

1) _____

2) _____

3) _____

If a partnership or individual owner, please list the names, addresses and social security numbers:

<u>Name</u>	<u>Address</u>	<u>SS#</u>

Financial Information

Bank name: _____ Address: _____

City: _____ State: _____ Zip: _____

Account #: _____ Contact: _____

Trade References

Company name: _____

Address: _____

Phone: _____ Fax # _____

Company name: _____

Address: _____

Phone: _____ Fax # _____

Company name: _____

Address: _____

Phone: _____ Fax # _____

Is your company tax exempt? _____ (If YES, you MUST attach exemption form)

In which COUNTY are you located? _____

Which Meier Supply branch is closest to you? _____

Do all invoices require purchase order numbers? _____

Do you require that your packing slips show pricing? _____

What is the credit line you require? _____

Please complete other side



Individual's Guaranty of Payment

In consideration of one dollar and other good and valuable consideration, the receipt of which is hereby acknowledged, I (we) hereby guarantee jointly, individually and personally unto Meier Supply Co, Inc/ Central Service Supply Inc/ Nohle Refrigeration Supplies/ West Side Refrigeration Supply the payment of any indebtedness on my (our) account now existing or which is incurred hereafter and in whatever form it may be evidenced. This is to be a continuing guarantee until all payments of all indebtedness have been made. It is not to be limited in any manner when and if this account is place in the hands of an agency or attorney for collection of any amounts unpaid and owing. I (we) guarantee and agree to pay agency/ collection fees, in addition to the amount of the unpaid balance due.

The undersigned may at any time terminate this guarantee by giving ten (10) days notice in writing to the Seller by Registered Mail sent to the Seller's office where upon liability of the expiration of said 10 days period. It shall nevertheless continue in full force as top all the deliveries made at any time prior to the expiration of said 10-day period.

It is further agreed that this guarantee shall continue notwithstanding any change in organization, corporate setup, or partnership change unless the Seller receives notice of such change at least 5 (five) days prior to the deliver of any merchandise, and that this guarantee shall be binding upon the heirs, personal representatives, estates, successors and assigns of each of the undersigned.

Date: _____

Guarantor Signature: _____

Witness:

Co-Guarantor Signature: _____

Witness:

Mail completed form to: **Meier Supply Co., Inc.**
 123 Brown Street
 Johnson City, NY 13790

or - Fax completed form (both sides) to: 607-797-4303