

**CENTRAL PLUMBING AND ELECTRIC,  
STEVENSON'S APPLIANCES  
DIVISIONS OF CENCO CORP  
625 S. AIRPORT DR. WESLACO, TX 78596**

**PHONE: (956) 969-8525  
FAX: (956) 968-7903  
PLUMBINGANDELECTRIC.COM**

**CONFIDENTIAL / APPLICATION AND AGREEMENT FOR CREDIT**

BUSINESS NAME \_\_\_\_\_ BUS. PHONE \_\_\_\_\_

CELL NUMBER \_\_\_\_\_ FAX # \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
(NUMBER) (STREET) (CITY) (STATE) (ZIP)

STREET ADDRESS \_\_\_\_\_  
(NUMBER) (STREET) (CITY) (STATE) (ZIP)

**IF YOUR COMPANY IS EXEMPT FROM PAYING SALES TAX, PLEASE PROVIDE US WITH A COPY.**

☐ TAX EXEMPT ☐ RESALE CERTIFICATE

FEDERAL TAX I.D. NUMBER \_\_\_\_\_

PROPRIETORSHIP \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

PARTNERSHIP \_\_\_\_\_ YEARS IN BUSINESS \_\_\_\_\_ PURCHASE ORDERS \_\_\_\_\_

CORPORATION \_\_\_\_\_ ANNUAL IN BUSINESS \_\_\_\_\_ NO OF EMPLOYEES \_\_\_\_\_

**PLEASE SELECT FROM THE FOLLOWING FOR BILLING PURPOSES:**

☐ EMAIL STATEMENT & INVOICES AT END OF THE MONTH ☐ EMAIL INVOICE ON A DAILY BASIS

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

PRINCIPAL OWNER(S) OR OFFICERS

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_ RESIDENCE PHONE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_ RESIDENCE PHONE \_\_\_\_\_

REAL ESTATE OWNED VALUE	TITLE IN NAME OF	BALANCE OWED	MORTGAGE CO.
HOME _____	_____	_____	_____
BUSINESS OTHER _____	_____	_____	_____
BANK REF. _____	_____	_____	_____

FINANCIAL STATEMENT ATTACHED \_\_\_\_\_ WILL BE MAILED (DATE) \_\_\_\_\_

**SUPPLIER REFERENCE (MUST BE COMPLETED)**

NAME \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE \_\_\_\_\_

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**COMPLETE BACK OF SHEET**

THE UNDERSIGNED AGREE TO THE FOLLOWING TERMS AND CONDITIONS:

All accounts are due and payable at Weslaco, Texas on the 10<sup>th</sup> day of the month following the prior month's billing and become past due thereafter. If full payment is not made by the end of the billing cycle, finance charges will be computed and added to the unpaid balance at the rate of .5% per month, not to exceed the highest lawful rate, at the time of the billing cycle immediately following and assessed each billing cycle until paid. If the Buyer fails to pay in full when due, Seller may discontinue further credit purchases. The above information is for the purpose of obtaining merchandise and material on credit. The undersigned agree as Guarantors, to guarantee and to be responsible and liable to pay Central Plumbing and Electric Supply or Stevenson's Appliances: Division of CENCO Corp. by the above named individual, partnership or corporation. The undersigned further agree that without notice, said indebtedness or credit may be changed in the form and that no change of partners or ownership shall affect this guarantee, until Central Plumbing and Electric Supply or Stevenson's Appliances; Division of CENCO CORP. is notified in writing by certified mail of the intent to be no longer held as Guarantor on future purchases. For the purpose of securing credit from you, I certify that the above information is true and complete to the best of my knowledge. Applicant authorized you to check my credit and employment history and to provide and/or obtain information about credit experience with me.

COMPANY NAME: \_\_\_\_\_

MONTHLY CREDIT NEEDED: \_\_\_\_\_

PRINCIPAL OWNER, CORP. OFFICER, C.E.O.'S

SIGNATURE: \_\_\_\_\_

PRINT SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

\_\_\_\_\_

OFFICE USE ONLY

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_ SALESMAN: \_\_\_\_\_

ACCOUNT # \_\_\_\_\_ STORE \_\_\_\_\_

CREDIT LIMIT: \_\_\_\_\_