



Please complete this application. Then mail or fax it to:

**Tampa Steel & Supply, Inc.**  
 1301 N 26<sup>th</sup> Street, Tampa, FL 33605  
 Fax: (813)-248-1473  
 Phone: (813)-241-2801

## Credit Application

### Contact Information

Company Name:		FED ID:	
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP:	
Type of business:	Date Established:	Tax Exempt: Yes / No	
Accounts Payable Contact:		Purchasing Contact:	
Sole proprietorship:	Partnership:	Corporation:	Other:

### Principals (names of officers or owners)

Name:	Position:	S.S.#
Name:	Position:	S.S.#
Name:	Position:	S.S.#

### Business / Trade References

Company name:			
Address:			
City:	State:	ZIP:	
Phone:	Fax:	E-mail:	
Type of account:	Account #:		
Company name:			
Address:			
City:	State:	ZIP:	
Phone:	Fax:	E-mail:	
Type of account:	Account #:		
Company name:			
Address:			
City:	State:	ZIP:	
Phone:	Fax:	E-mail:	
Type of account:	Account #:		

### Bank Reference

Bank Name:	Account #:	Contact:	
Address:			
City:	State:	ZIP:	Phone:

### Agreement

**Terms:** Invoices are payable in full within thirty (30) days of delivery. The seller reserves the right to add late charges of 1.5% per month to any overdue accounts. In the event that collection becomes necessary to collect monies due on this account, the buyer agrees to pay to **Tampa Steel & Supply, Inc.** all costs of collection including reasonable attorney's fee, whether or not suit is filed, and court costs.

### Signatures

Title: _____ Date: _____	Title: _____ Date: _____
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**Do you pay Sales Tax? Yes / No      If Not, please provide us with a current resale certificate**