



**MERCO
MARINE**

MERCO MARINE, INC. DBA MERCO MARINE
60 MERCO ROAD
WELLSBURG, WV 26070
800-396-3726
304-737-3008 (Fax)

CREDIT APPLICATION

Date: _____ Phone Number: _____

Firm Name: _____

Address: _____

Ownership: Individual Partnership Corporation Email: _____

Tax Status: Taxable Non-Taxable Both *If non-taxable, please return exempt certificate State: _____

Type of Business: _____

Credit Limit Requested: \$1,000 \$5,000 \$10,000 \$50,000 more than \$50,000

Purchasing Contact: _____ Accounting Contact: _____

Reference Information

Bank Reference: _____ Email: _____

Name: _____ Business Checking Acct #: _____

Address: _____

Phone: _____ Officer to Contact: _____

Provide as many references as possible. **Credit References**

Name: _____ Contact: _____

Address: _____

City: _____ State: _____ Zip: _____ Fax: _____

Phone: _____ Email: _____

Name: _____ Contact: _____

Address: _____

City: _____ State: _____ Zip: _____ Fax: _____

Phone: _____ Email: _____

Name: _____ Contact: _____

Address: _____

City: _____ State: _____ Zip: _____ Fax: _____

Phone: _____ Email: _____

Name: _____ Contact: _____

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PERSONAL GUARANTEE FORM

Name of Business:

In consideration of the extension of credit to the above-named business entity, the undersigned principals, jointly and severally, and personally, guarantee payment of all charges, billings and interest costs imposed hereafter in any open account extended to the above-named business entity. In the event that such charges, billings and interest costs are not promptly paid, the undersigned hereby guarantees as primary guarantor (s) the payment of: 1. any balance due on the aforesaid open account; 2. interest at the rate of 18% per annum upon the unpaid balance; 3. reasonable attorneys fees in the event legal action is undertaken for the collection of any sums due on such account.

To be signed by principals of corporation or business entity seeking credit:

Signature: _____

Name:

Home Address:

Business Address:

Tele #:

Signature: _____

Name:

Home Address:

Business Address:

Tele #:

Signature: _____

Name:

Home Address:

Business Address:

Tele #:

Signature: _____

Name:

Home Address:

Business Address:

Tele #:



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LETTER REQUESTING AUTHORIZATION TO RELEASE CREDIT INFORMATION

Thank you for your recent interest in establishing credit with our company. Please sign the authorization to release credit information below and complete the enclosed form. Then submit it to us with your most recent financial statements. We will contact your credit bank references, and then contact you regarding credit with our company.

Thank you,

Merco Marine Credit Manager

The undersigned has recently applied for credit with **Merco Marine**. The undersigned has been requested to provide information concerning my credit history. Therefore, I authorize the investigation of my credit information.

The release by you of information is authorized whether such information is of record or not. I do hereby release you and all person, agencies, agents, employees, firms, companies affiliated with you from any damages resulting from providing such information.

This information is valid for thirty (30) days from the date of my signature below. Please keep a copy of my release request for your files.

Thank you for your cooperation.

Signature: _____

Date/Time: _____

Title: _____