

Please print or type. For	m fields in red ar	e required.		
Company Name:				
Address:				
Address:				
City:			•	7.
Phone:	F	ax:	State:	Zip:
SHIP TO:				
Name:				
Address:				
Address:				
City:			State:	Zip:
Phone:				
Select Type of Business:	Sole Ownership	Partnership	Corporation	
Years in Business:	•	•	·	
A/P Email:		Phone:		

PARTNERS OR CORPORATE OFFICERS

Name 1: Title 1: Phone 1: Name 2: Title 2: Phone 2:



BANK REFERENCE			
Name:			
Address:			
Address:			
City:		State:	Zip:
Phone:			·
Contact:		Acct#:	
TRADE REFERENCES			
Your Trade References Sheet is accepta	ıble, provided it includes a fax	number and contact.	
Company 1:			
Contact 1:			
Phone 1:	Email:		
Company 2:			
Contact 2:			
Phone 2:	Email:		
Company 3:			
Contact 3:			
Phone 3:	Email:		



MERRIMAC INDUSTRIAL SALES STATEMENT OF TERMS AND AGREEMENT

I (We) the undersigned, agree to the following conditions:

- I (We) warrant that the information provided on this application is true and correct.
- I (We) will notify you immediately of any changes in our business structure as stated here.
- I (We) will pay all invoices according to your stated terms Net 30 days.
- I (We) agree to pay a late charge of 1.5% per month if there is a delinquency in payment.
- I (We) agree to pay legal fees if collection action is required.
- I (We) agree to pay a \$25.00 service fee for any checks returned as noncollectable.
- I (We) agree that unless goods are returned within seven (7) days of delivery, said goods are deemed accepted by me (us).
- I (We) agree that Massachusetts law applies to this agreement and we agree to submit to the jurisdictions of Massachusetts should collection be required.
- I (We) agree to remit sales tax (if any) directly to the State, except MA and CT, and ME.

Applicant's Signature:	Date:
Printed name:	
Title:	



PERSONAL GUARANTEE

To induce you to sell merchandise and extend credit on an open account to the applicant named, I hereby personally and unconditionally guarantee the payment of any indebtedness which may from this date forward or any time thereafter be owed to you by the said applicant.

I understand that in consideration for and in reliance on this personal guarantee, you will extend credit on an open account to the applicant.

In return for the above stated consideration, I acknowledge that this personal guarantee of credits is binding upon me as an individual and I do sign this as an individual not in any representative capacity.

All prior notice of default and demand for payment are hereby waived.

This guarantee shall continue in full force and effect until such time as I give you written notice of revocation by certified mail. Such notice of revocation shall be ineffective as to any existing indebtedness or as to any transaction commitment previously undertaken by you in reliance upon this guarantee.

Guarantor's Signature:	Date:	
Printed Name:		
Address:		
Address:		
City:	State:	Zip:
Phone:		•
Social Security No:		
Witness's Signature:	Date:	
Printed Name:		

If submitting by mail, please send to:

Merrimac Industrial Sales 111 Neck Road, Haverhill, MA 01835

If submitting by fax, please use:

Fax Number: 978-372-6226

Please do not submit the form via email, as this is not a secure method to submit personal data.

If you have any questions, please call us at 978-372-6006.

^{*}Application is incomplete unless the Statement of Terms and Agreement is signed.