

Credit Account Application

Please print out this form, fill it out completely, and sign all appropriate sections. Included is a credit agreement which **must be signed**, along with the personal guarantee which also must be completed for any account that is a Corporation and LLC. Mail to:

I. D. Booth Inc / Booth Electrical Supply
Wholesalers
620 William Street, P.O. Box 579
Elmira, NY 14902-0579

ACCOUNT INFORMATION:

Individual/Business Name: _____

Street & Box Address: _____

City/County: _____

State & Zip Code: _____

Mailing Address: _____

City/County: _____

State & Zip Code: _____

Business Phone: () _____

Fax Number: () _____

Email: _____

Cell Phone Number: () _____

Federal ID Number: _____

Social Security Number: _____

YOUR COMPANY'S INFORMATION:

Type of Business: _____

Years in Business: _____

Please check that applies: Proprietorship _____ Partnership _____ Corporation _____

Number of Employees: _____ Work is conducted from home _____ Shop _____

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