

MILLER'S  
— FINE DECORATIVE —  
HARDWARE

226 CENTER STREET #3, 4 & 5 ~ JUPITER, FLORIDA 33458

ph (561) 746-4800, 286-4810 fax (561) 743-0233 e-mail: judy@millers.com

**To establish an open account, we must have this form completed, faxed back and original mailed.**

Date: \_\_\_\_\_

Proprietor, partners or officers name(s): \_\_\_\_\_

Account name: \_\_\_\_\_

Date Business Established: \_\_\_\_\_

Billing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_

Shipping Address: \_\_\_\_\_ Are purchase orders required?:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ YES or NO

If items purchased are for resale, please mail exempt certificate with credit application.

*Trade and bank references; **must** include address, phone & fax number, and how long account has been opened.  
(No accounts of less than one year's duration will be considered.)*

**Bank Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_

Account #: \_\_\_\_\_

**Trade Ref #2:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Date Opened Acct.: \_\_\_\_\_

**Trade Ref#1:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Date Opened Acct.: \_\_\_\_\_

**Trade Ref#3:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Date Opened Acct.: \_\_\_\_\_

Terms: Net 10th Prox. 1 1/2% interest per month on unpaid balances. Miller's Fine Hardware, Inc. reserves the right to set limit on credit amount granted, and to revoke credit at any time it considers necessary.

*I the undersigned account holder agree to pay any unpaid balance of the open account on demand. In the event that the unpaid balance is not paid within 30 days following the date of invoice, the account holder agrees to pay interest at the rate of 1 1/2% per month on the unpaid balance. In the event that this account is referred to a collection agency or attorney for collection, the account holder agrees to pay all collection costs. I agree to the above terms, and authorize the release of the all requested information regarding my account to Miller's Fine Hardware, Inc.*

\_\_\_\_\_  
*Authorized Signature*

\_\_\_\_\_  
*Date*