



## Credit Application

**Credit Limit Request:** \_\_\_\_\_

### Business Information:

Company Legal Name: \_\_\_\_\_ DBA/AKA: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Number of Employees \_\_\_\_\_ Number of Years in business \_\_\_\_\_

Have you ever filed Bankruptcy?: YES \_\_\_\_\_ NO \_\_\_\_\_ If yes when was it discharged?: \_\_\_\_\_

Physical address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Bill to address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_ Fax# : \_\_\_\_\_

Email address: \_\_\_\_\_ Would you like your invoices emailed?: \_\_\_\_\_ Statements? : \_\_\_\_\_

Tax Id# \_\_\_\_\_ SSN# \_\_\_\_\_ FED ID# \_\_\_\_\_ Buyer Contact: \_\_\_\_\_

Type of Ownership: \_\_\_\_\_ Corporation \_\_\_\_\_ Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Limited Liability

Products/Services your company will be interested in: \_\_\_\_\_ MULCH \_\_\_\_\_ TOPSOIL \_\_\_\_\_ SAND \_\_\_\_\_ GRAVEL \_\_\_\_\_ LIMESTONE \_\_\_\_\_ NURSERY  
 \_\_\_\_\_ DUMPING YARDWASTE \_\_\_\_\_ BAGGED MATERIAL \_\_\_\_\_ SALT \_\_\_\_\_ SPECIAL SOIL BLENDS \_\_\_\_\_ OTHER

Are you tax Exempt? YES \_\_\_\_\_ NO \_\_\_\_\_ If Yes tax exempt# \_\_\_\_\_ Do you require a PO#?: YES \_\_\_\_\_ NO \_\_\_\_\_  
 (Please attach completed exempt form)

Have you ever applied or received credit from Kurtz Bros., Central Ohio LLC before? If so under what name?: \_\_\_\_\_

### Trade References/ Bank References:

1. Name: \_\_\_\_\_ Acct# \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_ Contact \_\_\_\_\_

2. Name: \_\_\_\_\_ Acct# \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_ Contact \_\_\_\_\_

3. Name: \_\_\_\_\_ Acct# \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_ Contact \_\_\_\_\_

Bank Name: \_\_\_\_\_ Bank Address: \_\_\_\_\_

Acct#: \_\_\_\_\_ Bank Telephone: \_\_\_\_\_ Bank Contact: \_\_\_\_\_



**Terms of Account/Credit reference Approval:**

Our terms are Due Upon Receipt from the date of the invoice. If not paid in full by the due date, purchaser and/or owner agrees to pay a late charge of 1.5% per month. All invoice discrepancies must be addressed within 60 days of the invoice date. Any invoice aging 90 days or more will result in a CREDIT HOLD being placed on your account. All applicants signatures attests financial responsibility, and the ability and the willingness to pay our invoices in accordance with the terms stated above. The undersigned, on his/her own behalf and on the behalf of the applicant, hereby authorizes Kurtz Bros to provide a copy of this agreement to the suppliers/banks listed as evidence of applicants consent to release information regarding your business in order to obtain a credit decision.

  X    
 Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Relationship to business? \_\_\_\_\_

**Personal Agreement:**

In consideration of Kurtz Bros., Central Ohio LLC extension of credit to \_\_\_\_\_ I,

Personally and unconditionally agree to pay all invoices, statements, bills and any monies due to Kurtz Bros., Central Ohio LLC that are incurred by the above identified business or individual and not paid by them in accordance with the credit terms set forth above. I understand that I am personally liable for this debt regardless of whether debt exceeds the line of credit requested by the above identified business or individual.

Dated this \_\_\_\_\_ day \_\_\_\_\_, \_\_\_\_\_

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

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

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

Please return completed application with tax exempt form (if applicable) to Ashton Crumpler at [acrumpler@kurtzcoh.com](mailto:acrumpler@kurtzcoh.com)  
 Please allow 5-7 days for processing.

**Kurtz Bros.**

**Central Ohio, LLC**

*We make the good earth better!*™

6055 Westerville Rd, Westerville Ohio 43081 (614)882-0200/(614)-882-3363  
 711 Frank Rd, Columbus Ohio 43223 (614)491-0868/(614)491-0878  
 6279 Houchard Rd, Dublin Ohio 43016 (614)873-2000/(614)873-7191  
 2509 Johnstown-Alexandria Rd, Alexandria Ohio 43001 (740)739-4637  
 2506 Jackson Pike Columbus Ohio- TWDS/ADS facility only- (For Info please contact Ashton at the westerville office)

**Sales and Use Tax  
Unit Exemption Certificate**

The purchaser hereby claims exception or exemption on the purchase of tangible personal property and selected services made under this certificate from:

**KURTZ BROS. CENTRAL OHIO, LLC.**

(vendor's name)

and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase, or both, as shown hereon:

**Purchaser must state a valid reason for claiming exception or exemption.**

\_\_\_\_\_  
Purchaser's name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City, state, ZIP code

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Vendor's license number, if any

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either Administrative Code Rule 5703-9-10 or 5703-9-25.

This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with Administrative Code Rule 5703-9-14.