



44 Wall Street • Suite 401 • New York, NY 10005  
 Phone (212) 233-4651 • Fax (212) 571-5301  
 www.212hardware.com

Dear Prospective Customer;

Please complete the form below and return to Evelyn Lleras [evelyno@212hardware.com](mailto:evelyno@212hardware.com) (or fax to 212-571-5301) for processing. We look forward to doing business with you.

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone/Fax: \_\_\_\_\_  
 Principals of Company: \_\_\_\_\_  
 \_\_\_\_\_  
 Credit line requested: \_\_\_\_\_  
 Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor \_\_\_\_\_ Individual \_\_\_\_\_  
 S.S.# \_\_\_\_\_ FED ID# \_\_\_\_\_  
 Years in Business: \_\_\_\_\_ Date & State Incorporated: \_\_\_\_\_

**TRADE REFERENCES:**

Name:	
Address:	
City/State/Zip:	
Phone:	
Fax:	
Contact:	
Acct:	

Name:	
Address:	
City/State/Zip:	
Phone:	
Fax:	
Contact:	
Acct:	

Name:	
Address:	
City/State/Zip:	
Phone:	
Fax:	
Contact:	
Acct:	

Name:	
Address:	
City/State/Zip:	
Phone:	
Fax:	
Contact:	
Acct:	

If the job is bonded, kindly list bonding company's name, address and bond number. Prompt completion of the above information will help us facilitate our services to you.

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STATEMENT OF TERMS: Net 30 days. No cash discount allowed. Credit privileges may be automatically suspended without prior notice on account balances over 30 days. Third party checks are unacceptable as payment on open accounts and COD accounts. I/We have read the above terms, understand them and agree to them. Our firm is financially able to meet any commitments we have made and we expect to pay you according to your terms.



# WEINSTEIN & HOLTZMAN

Established 1920

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Dear Prospective Customer;

Due to state laws concerning bank records, your bank must receive authorization from you to provide us with the information we need in order to process your credit application.

I/We hereby authorize (Bank name) \_\_\_\_\_  
To furnish Weinstein & Holtzman of NY, LLC with the information requested concerning my/our checking account. Please expedite this information.

Bank Name: \_\_\_\_\_ Account#: \_\_\_\_\_

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

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

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

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

Name/Title: \_\_\_\_\_

Customer Name: \_\_\_\_\_

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### For Office Use Only

<input type="checkbox"/> Commercial Hardware	Approval	_____
<input type="checkbox"/> Commercial Hardware of MD	Date	_____
<input type="checkbox"/> Commercial Hardware Texas	Credit Limit	_____
<input type="checkbox"/> Tru-Fit		
<input type="checkbox"/> Next Door Distribution		
<input type="checkbox"/> Counter		
<input type="checkbox"/> Weinstein & Holtzman of NY		