



**CORPORATE OFFICES**

275 EAST MAIN STREET, ORANGE, MA 01364

Phone: (978)544-8811 Fax: (978)544-0012

E-Mail: ar@petestire.com Internet: www.petestire.com

**Massachusetts**

**Gardner** (978) 632-7697

591 West Broadway

**Northampton** (413) 586-8815

186 North King St.

**Orange** (978) 544-8811

275 East Main St.

**Randolph** (781) 986-8473

85 York Avenue

**Shrewsbury** (508) 754-9876

407 Hartford Tpke. Rd.

**Springfield** (413) 736-8700

125B Progress Avenue

**Woburn** (781) 721-9070

280 Mishawum Rd.

**Westborough** (508) 871-1150

50 Smith Parkway

**Connecticut**

**Danbury** (203) 743-7648

19A Chestnut Street

**Franklin** (860) 642-7577

15 Murphy Road

**Waterbury** (203) 754-2156

100 Captain Neville Dr.

**South Windsor** (860) 291-9165

25R Bidwell Rd.

**Rhode Island**

**Providence** (401) 521-2240

80 Public Street

**Vermont**

**White River Jct** (802) 291-9216

127 Round House Rd.

**Rutland** (802) 747-0752

62 Randbury Rd.

**Montpelier** (802) 839-1924

122 Gallison Hill Rd.

**New Haven** (802) 453-2106

92 Hunt Rd.

**Middlebury** (802) 388-4053

28 Willow Dr

**Williston** (802) 651-0841

348 Boyer Circle

**New Hampshire**

**Amherst** (603) 672-8973

54 Route 101A

**W. Chesterfield** (603) 614-8066

100A Route 9

**Manchester** (603) 669-5432

459 E. Industrial Park Dr.

**APPLICATION FOR CREDIT**

\*\*\*All information is required in order to process application\*\*

**Billing Address**

Company Name:

Address:

City:

State:

Zip:

Telephone:

Fax:

Email:

Web Address:

**Shipping Address (If different from Billing)**

Address:

City:

State:

Zip:

Telephone:

Fax:

Is a purchase order required?

(Circle One)

Yes

No

Principal/Owner (Full Name)

Personal Address:

City:

State:

Zip:

Telephone:

Fax:

A/P contact:

Year Opened:

Type of Business:

Corporation

Partnership

Proprietorship

Tax Exempt?

(Circle One)

Yes

No

(If exempt, a copy of your form must be submitted with application)

**Number of Vehicles/Equipment (Please indicate Qty of Each)**

\_\_\_\_\_ Passenger Cars

\_\_\_\_\_ Pick-Up Trucks

\_\_\_\_\_ Straight Trucks

\_\_\_\_\_ Road Tractor

\_\_\_\_\_ Trailers

\_\_\_\_\_ Farm Tractors

\_\_\_\_\_ Loaders

\_\_\_\_\_ Log Skidder



**Company Name:** \_\_\_\_\_

**Tax ID Number:** \_\_\_\_\_

**Bank Reference**

Name of Financial Institution: \_\_\_\_\_

Telephone: \_\_\_\_\_

Account Number: \_\_\_\_\_ Type of Account \_\_\_\_\_

**Trade References (3 Required)**

**Company Name:** \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Email/Fax: \_\_\_\_\_

**Company Name:** \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Email/Fax: \_\_\_\_\_

**Company Name:** \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Email/Fax: \_\_\_\_\_

If this account is not paid when due, the purchaser agrees to pay any and all costs of collection, including reasonable attorney fees. All goods remain property of Pete's Tire Barns until paid in full.

Salesman name or Petes Tire Barn's location nearest to you: \_\_\_\_\_

***I hereby grant permission for you to verify this information with the above listed references.***

**Signed:** \_\_\_\_\_ **Position:** \_\_\_\_\_ **Date:** \_\_\_\_\_