



980 Turnpike St, Canton, MA 02021  
TOLL FREE: (800) 526-6700

Tel: (781) 767-1019 FAX: (781) 767-1021

## ***CREDIT APPLICATION***

Company: \_\_\_\_\_ Tax ID#: \_\_\_\_\_

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

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

Phone #: ( ) \_\_\_\_\_ Fax#: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Business Started \_\_\_\_\_ Years at Location: \_\_\_\_\_

Type of Business: Corporation \_\_\_\_\_ Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_

President / Owner: \_\_\_\_\_ Phone #: ( ) \_\_\_\_\_

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

Purchase Order Required: Yes \_\_\_\_\_ No \_\_\_\_\_

(If required, list authorized purchasers): \_\_\_\_\_

Taxable: Yes \_\_\_\_\_ No \_\_\_\_\_ (If tax exempt, attach exemption certificate)

(Please attach list of additional Bank & Trade References)

Bank Reference: \_\_\_\_\_ Account # \_\_\_\_\_

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

Phone: ( ) \_\_\_\_\_ Contact: \_\_\_\_\_

Trade Reference: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Contact: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Balance: \_\_\_\_\_

Trade Reference: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Contact: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Balance: \_\_\_\_\_

Trade Reference: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Contact: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Balance: \_\_\_\_\_

I HEREBY GRANT PERMISSION FOR YOU TO VERIFY THIS INFORMATION:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_



Form ST-4  
**Sales Tax Resale Certificate**  
Massachusetts Department of Revenue

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Name of purchaser \_\_\_\_\_ Social Security or Federal Identification number \_\_\_\_\_

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Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Type of business in which purchaser is engaged: \_\_\_\_\_

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Type of tangible personal property or service being purchased (be as specific as possible) \_\_\_\_\_

NORTHEAST WHOLESALE NAIL & FASTENER SUPPLY CORP.  
980 Turnpike Street, Canton, MA 02021

TELEPHONE ( 800) 526-6700 TELEPHONE (781) 767-1019 FAX (781) 767-1021

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Name of vendor from whom tangible personal property or services are being purchased: \_\_\_\_\_

I hereby certify that I hold a valid Massachusetts Vendor's Registration, issued by the Commissioner of Revenue, pursuant to Massachusetts General Laws, Chapter 64H, section 7, and that I am in the business of selling the kind of tangible personal property or services being purchased under this certificate, and that I intend to sell such property or services in the regular course of my business. Signed under the penalties of perjury.

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Signature of purchaser \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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Check applicable box: Single purchase certificate \_\_\_\_\_ Blanket certificate \_\_\_\_\_

Northeast Wholesale Nail & Fastener Supply Corp.  
980 Turnpike Street, Canton, MA 02021

When complete, please fax to (781) 767-1021