



Type of Service:
<input type="checkbox"/> Recycling
<input type="checkbox"/> Haulers
<input type="checkbox"/> Leafgro

CREDIT APPLICATION

Facilities Needed:
<input type="checkbox"/> Dickerson
<input type="checkbox"/> Harford County
<input type="checkbox"/> Midshore I
<input type="checkbox"/> Midshore II
<input type="checkbox"/> Prince George's

Customer Information:

The Maryland Environmental Service requires a credit application be completed and approved before a credit account can be established.

If you are a public agency or political subdivision of the State, please give us the names of the appropriate administrative officers and ignore the business-oriented questions in the "basic Information" section.

If you are a business, please provide the names of the officers, or in the case of partnerships and proprietorships include the names of the owners.

All credit applications require the signature of authorized official.

A. BASIC INFORMATION

Entity Name: _____

MD SDAT ID Number: _____

Physical Address: _____

Mailing Address: _____

City, State, Zip: _____

Telephone Number:(____)_____ Federal ID#: _____

Fax #: (____)_____ E-mail: _____

Legal Entity: Government Agency____ Non-Profit____
Corporation____ Partnership____ Proprietorship____
D&B Number _____

Type of Business: _____

Estimated Monthly Business in Dollars _____

If refuse hauler, anticipated tonnage _____

Year firm started business: _____

Parent firm: _____

Address: _____

Telephone Number (____)_____ Fax: (____)_____



B. OFFICERS, PARTNERS, OWNERS, ADMINISTRATORS

1. Name _____ Title _____
Address _____
Telephone No. (____) _____ Fax: (____) _____
E-mail address: _____

2. Name _____ Title _____
Address _____
Telephone No. (____) _____ Fax: (____) _____
E-mail address: _____

3. Name _____ Title _____
Address _____
Telephone No. (____) _____ Fax: (____) _____
E-mail address: _____

Contact for payment:

Name: _____
Title _____ Telephone No. _____
E-mail address: _____

C. CREDIT REFERENCES
(Must list 3 with fax numbers or email addresses)

1. Company: _____ Contact: _____
Account No.: _____

Address: _____
Telephone: (____) _____ Fax: (____) _____
Email: _____

2. Company: _____ Contact: _____
Account No.: _____

Address: _____
Telephone: (____) _____ Fax: (____) _____
Email: _____

3. Company: _____ Contact: _____
Account No.: _____

Address: _____
Telephone: (____) _____ Fax: (____) _____
Email: _____



D. BANK REFERENCE

Bank : _____ Contact: _____
Account No.: _____

Address: _____

Telephone: (____) _____ Fax: (____) _____
Email: _____

E. FINANCIAL STATEMENTS

Please attach a copy of your most recent financial statements.
(Providing Financial Statements will expedite credit approval. Information will be held in the strictest confidence.)

F. BILLING INSTRUCTIONS

Exempt from Maryland Tax? No ___ Yes ___ Sales Tax Exemption No: _____
Please attach a copy of certificate.

Provide applicable purchase order or contract number. _____

G. SIGNATURES

By signing this application, I agree to the terms as stated on the Maryland Environmental Services invoice including applicable finance charges for late payment of invoices. I further agree to promptly pay all amounts due to MES for any goods, products, services, or any other items provided by MES.

By signing this application, I further authorize bank and credit references listed here to release my financial information to the Maryland Environmental Service. I hereby authorize Maryland Environmental Service to perform a credit check through a credit reporting agency.

Authorized signature _____ **Date** _____

Printed Name _____ **Title** _____

MES OFFICE USE ONLY

APPROVED: YES ___ NO ___

TERMS: _____ CREDIT LIMIT: _____

BY: _____ DATE: _____

REMARKS _____