

# RICCIARDI BROTHERS OF PENNSYLVANIA, INC.

THE PAINT & DECORATING PEOPLE

1915 Springfield Avenue

Maplewood, NJ 07040

(973) 762 - 3830

## C.O.D. ACCOUNT APPLICATION

### MUST PRINT LEGIBLY IN ORDER FOR ACCOUNT TO BE OPEN

DATE: \_\_\_\_\_

STORE: \_\_\_\_\_ SALESMAN: \_\_\_\_\_

ACCOUNT NAME: \_\_\_\_\_

CONTACT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

CELL #: \_\_\_\_\_ P.O. REQUIRED?  YES  NO

WOULD YOU LIKE TO HAVE YOUR INVOICES E-MAILED?  YES  NO

IF YES, PLEASE PROVIDE E-MAIL ADDRESS: \_\_\_\_\_

**\*\*IN THE EVENT THAT CHARGE IS ISSUED ON THE ABOVE MENTIONED ACCOUNT, AND PAYMENT IS NOT RECEIVED WITHIN THIRTY (30) DAYS, THERE WILL BE A BILLING STATEMENT WITH THE BALANCE OF THE ACCOUNT ISSUED MONTHLY AND YOU WILL BE HELD RESPONSIBLE FOR PAYMENT. THE UNDERSIGNED IS HEREBY PERSONALLY GUARANTEEING ANY AND ALL UNPAID AMOUNTS WHICH ARE DUE TO RICCIARDI BROTHERS, INC. REGARDING THIS ACCOUNT.\*\***

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

WITNESS: \_\_\_\_\_

DATE: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_

**\*\*COPY OF DRIVER'S LICENSE IS REQUIRED\*\***