



# Commercial Charge Account Application

Store # \_\_\_\_\_

FOR OFFICE USE ONLY:

Account #: \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Bill To: \_\_\_\_\_

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

Accounts Payable Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Federal ID #: \_\_\_\_\_ D&B #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Business Focus – Select From Drop Down Menu:

Great Lakes Ace would like to email invoices and statements in lieu of mailing. The email would be sent from **B2B@GreatLakesAce.com**. Please check box approving emailed invoices:

Yes      No

Your email address for billing: \_\_\_\_\_

If you are tax exempt, please send a blanket tax exception certificate and complete the following:

Tax Exemption #: \_\_\_\_\_ Tax Exemption Reason: \_\_\_\_\_

Is a purchase order required for each purchase?      Yes      No

**Note:** If you select YES, our system will not allow an account purchase without a purchase order

Is an authorized signer required for each purchase?      Yes      No

**Note:** If you select YES, our system will only allow an authorized signer to make purchases. If you select NO, all purchases made on your account will be your responsibility.

If Yes, please list authorized signers (attach additional sheet if necessary):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

All information collected is done so exclusively with your consent, and only to communicate with you and your company in regards to your Business Account. We will send invoices, statements and from time to time special offers or pricing. We will not, in any circumstances, share your information with other individuals or organizations without your permission, including public organizations, corporations or individuals, except when applicable by law.

**Great Lakes ACE Hardware**  
**Rylee's ACE**      **Rockford ACE**

For more ordering information, please contact your local  
Business to Business Champion or Sales Associate.



# Credit References

(please fill out completely)

Bank Name: \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

Credit Reference: \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

Credit Reference: \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

Credit Reference: \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

Credit Reference: \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

For quick approval of this application, simply email completed form

to: **B2B@GreatLakesAce.com**

Payment is due upon receipt of monthly statement. The undersigned understands that a 1-1/2% monthly finance charge (18% annually) may be added to any balance over 30 days. In the event of default, the undersigned promises to pay legal interest on the indebtedness, together with such collection costs and reasonable attorney fees as may be required to affect collections.

All information collected is done so exclusively with your consent, and only to communicate with you and your company in regards to your Business Account. We will send invoices, statements and from time to time special offers or pricing. We will not, in any circumstances, share your information with other individuals or organizations without your permission, including public organizations, corporations or individuals, except when applicable by law.

Signed: \_\_\_\_\_ (must be signed by an officer)

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_