



**Architectural Art Mfg.**  
A division of Pittcon Architectural Metals LLC

**Pittcon  
Industries**

**Architectural Art Mfg.**  
A division of Pittcon  
Architectural Metals, LLC  
6409 Rhode Island Ave.  
Riverdale, MD 20737-1098  
800-835-0028 (Arch. Art Mfg)  
888-213-0952 (Pittcon)  
Fax: 800-897-3129

**Credit Application**

Return to Nathan Goldstein, Credit Manager  
Via email: [ngoldstein@pittconindustries.com](mailto:ngoldstein@pittconindustries.com)  
Via fax: 800-897-3129

Legal Company Name (including d/b/a): \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Name of President/Owner: \_\_\_\_\_ Name of Treasurer/Controller: \_\_\_\_\_

Accts Payable Mgr/Contact: \_\_\_\_\_ Year Business Started: \_\_\_\_\_

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

Est. Annual Sales: \_\_\_\_\_ Amount of Credit Requested: \_\_\_\_\_ *(A 1/3 deposit is required with Custom Jobs regardless of credit terms)*

Tax Exempt Number (forward certificate with application): \_\_\_\_\_ Dunn & Bradstreet #: \_\_\_\_\_

**Suppliers:** (At least four references-within building industry preferred. Attach any additional trade or bank references.)

1. Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number \_\_\_\_\_ Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

2. Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number \_\_\_\_\_ Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

3. Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number \_\_\_\_\_ Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

4. Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number \_\_\_\_\_ Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

**Bank Accounts:**

1. Name \_\_\_\_\_ Account Number \_\_\_\_\_ Contact/Phone \_\_\_\_\_

2. Name \_\_\_\_\_ Account Number \_\_\_\_\_ Contact/Phone \_\_\_\_\_

This application authorizes Pittcon Industries and/or its parent company, Pittcon Architectural Metals, LLC to perform routine credit investigation procedures with banks and trade references. **Failure to provide information may result in a delay in extending open credit.** Applicant's signature attests financial responsibility, ability and willingness to pay monies in accordance with terms. If collection action must be initiated due to nonpayment, collection fees plus applicable interest shall be imposed. Acceptance of payment in arrears or of partial payment shall not be deemed a waiver of the right to demand prompt payment. Applicant understands this application may be revoked or rejected by Pittcon Industries. Applicant's signature certifies that everything stated in this application is correct to the best of his/her knowledge.

Signed: \_\_\_\_\_  
Name (Must be signed by and Officer/Owner) \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY:** Terms: \_\_\_\_\_ Limit: \_\_\_\_\_  
Signed: \_\_\_\_\_ Date: \_\_\_\_\_

CONF# \_\_\_\_\_

Notes: \_\_\_\_\_