

Remittance Address: TMS South, Inc., P.O. Box 68 Taylors, SC 29687 FAX: 864/770-1105



When completed, return or fax to address above. Email to: tammy@tmssouth.com

CREDIT APPLICATION		
Business Name:		
Mailing Address:		
Shipping Address:		
Business Phone:	Business Type:	Date Started:
Management Company:		
Management Company Phone Name of Administrator		
Method of Receiving Invoices: Mail Fax: Email: (address)		
Is a PO required?		
Tax Information: Taxable Exempt		
If tax exempt, please fax "Blanket Certificate of Resale" to 864/770-1105		
County Name & Tax Rate:		
City Name & Tax Rate:		
Principal Owner(s) or Officer(s):		
Name:		Phone:
Name:		Phone:
Bank Reference:		
Name:		Title:
Address:		Phone:
Trade References:		
Company/Contact:		Email:
Address:		Phone:
Company/Contact:		Email:
Address:		Phone:
Company/Contact:		Email:
Address:		Phone:
Terms: 1% 10 Days, Net 30 on all invoices		
Name of Individual Applying:		Title:
Signature		Date

STANDARD LIMIT: \$1000.00 DESIRED LIMIT (Circle One): \$2000.00 \$2500.00 \$5500.00

TMS South, Inc.'s standard payment terms are net 30 days from the invoice date. Customer agrees to pay upon demand at any time to TMS South, Inc. the full amount of said indebtedness, plus attorney's fees, and costs incurred in connection with the collection of the account, whether or not suit is filed.