## PROJECT FINANCING APPLICATION



Silmar Account #:		Branch:	
Project Financing App	licant:		
Job/Project Name:			
Address:			
City:	State:	Zip:	
Type of Project:			
Public Job: 🗆 State	🗆 City 🗖 County	Private Property Job: 🗆 Commercial	🗆 Residential
Project #:		Contract \$:	
	Are you working dire	ectly with: (Check all that apply)	
🛛 General Contract	or:		
Address:			
City:	State:	Zip:	
🗆 Electrical Contrac	:tor:		
Address:			
City:	State:	Zip:	
Owner:			
Address:			
City:	State:	Zip:	

**NOTE:** Please submit a copy of your contract and the Notice of Commencement, if available. In the event that a Claim of Lien is placed on the above-mentioned property address and suit is filed for non-payment, it is understood that Silmar Electronics may also file suit against the Project Financing account applicant. In addition, there will be a fee of \$320 for filing the claim and \$50 fee for notice to owner. Maximum 2 active Project Financing accounts. Payments are required to be made via ACH wire or check, processing fee will be charged to Credit Card payments.

Please return this form to: credit@silmarelectronics.com or your local sales representative. Should you have any questions, please contact our Credit Department at: 1 (800) 325-9708

 Authorized Signature:
 Printed Name:

 For Office Use Only

 Date of 1st Delivery/Pick-Up:
 Date NTO Requested: