

CORPORATE CREDIT APPLICATION

LEGAL NAME OF BUSINESS: _____ DATE: _____
 DBA NAME: _____
 ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 TELEPHONE: () _____ FAX: () _____
 NATURE OF BUSINESS: _____ DATE STARTED: _____
 FEDERAL ID# (Corporations): _____ MASTER LICENSE#: _____
 CORPORATE LICENSE#: _____

TRADE References (Four Largest Creditors):				
Name	Address	City/State/Zip	Phone:	Fax
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

FINANCIAL DATA:
 Current Total Assets \$ _____ Current Total Liabilities \$ _____ Previous Year's Total
 Sales: \$ _____ Accounts Receivables \$ _____ Current Total Inventory: \$ _____

BANK NAME	ADDRESS	ACCOUNT#	PHONE
_____	_____	_____	_____

Contact Person at Bank _____

I hereby give approval for release of information Signature: _____

OFFICERS OF CORPORATION			
Title	Name	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever traded with our Company before? Yes _____ No _____ If yes, when? _____
 Under what name? _____

Sales Tax Status: Taxable _____ Exempt _____ (Attach Exemption Certificate to this form)

Have you ever filed bankruptcy? Yes _____ No _____
 If yes, please give date, state and name: _____

Does your Company use a purchase order? Yes _____ No _____

Credit Limits: How much credit do you require for this account? _____ Please state in dollars per month: _____

Person(s) authorized to charge on this account at time of application: _____

Note: Unless you tell us otherwise in writing all employees of your business are authorized to charge.

Invoice to be sent to attention of: _____

The above information is for the purpose of obtaining credit and is warranted to be true.

I/We authorize the person or firm to whom this application is made to investigate the references listed pertaining to my/our credit responsibility. Furthermore, I agree to the terms of sale and return policy of Salem Plumbing Supply Co. Inc. I shall pay to the seller all reasonable costs of the collection of money due and payable, including attorney fees. Salem Plumbing Supply Co. Inc. may at any time, suspend or revoke any credit extended, if in its opinion, the buyers financial condition or any other circumstance reasonably warrant. **APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH TERMS STATED.** Invoices are due 2% 10 days net 25th. A finance charge of 1½% per month (annual percentage rate of 18%) will be applied on unpaid balances over 30 days.

Notice of Buyer: (1) Do not sign this agreement if any of the spaces intended for the agreed terms are left blank. (2) You are entitled to a copy of this agreement at the time you sign it. (3) You may at any time pay off the full unpaid balance under this agreement. (4) You may under certain circumstances redeem the property, if repossessed because of your default, and you may, under certain circumstances, require a resale of the property if repossessed. (5) The seller has no right to unlawfully enter your premises or commit any breach of the peace to repossess goods purchased under this agreement. (6) You may cancel a purchase under this agreement if it has been signed by a party thereto at a place other than the address of the seller which may be his main office or branch thereof; provided you notify the seller in writing at his main office or branch, by ordinary mail posted, by telegram sent or by delivery, not later than midnight of the third business day following a purchase under this agreement.

Signature: _____ Title: _____ Date: _____
 Signature: _____ Title: _____ Date: _____

INDIVIDUAL GUARANTEE OF PAYMENT

The undersigned, hereby being a principal of the above business applicant, in consideration of extending credit to the applicant based on this application, jointly and severally, individually, unconditionally guarantee(s) payment of any and all present or future obligations and indebtedness which the applicant has incurred or shall incur to the above named company. The undersigned further agrees to pay all reasonable costs, collection fees, attorneys' fees and expenses incurred in the event of failure of applicant to pay all obligations and indebtedness when due.

Signature(s) _____ Social Security Number _____
 Signature(s) _____ Social Security Number _____
 Address _____
 Witness: _____ Witness: _____