

CREDIT APPLICATION			
COMPANY NAME:		PHONE:	
STREET ADDRESS:			
CITY:	_ STATE:	ZIP:	
BILLING ADDRESS (IF DIFFERENT FROM ABOVE):			
CITY:	STATE:	ZIP:	
EMAIL.			
EMAIL: COMPANY IS A: ☐ CORPORATION ☐ PARTNER		SHIP TILC	
NOTE: IF IN BUSINESS LESS THAN FIVE YEARS, YOU MUST COMPLETE PERSONAL GUARANTEE			
NOTE: II IN BUSINESS EESS THAN THE TEAKS, TOO MUST COMPLETE TERCONAL GUARANTEE			
COMPANY DIRECTORS/OFFICERS/PRINCIPAL			
NAME 1:		_TITLE:	
HOME ADDRESS:		PHONE:	
NAME 2:		TITLE:	
HOME ADDRESS:		_PHONE:	
BANKING DETAILS			
BANK NAME:		ACCOUNT #:	
BRANCH ADDRESS:			
BANK CONTACT NAME:			
TRADE REFERENCES			
VENDOR 1:	CONTACT:		
PAYMENT ADDRESS:			
	_		
PHONE:	FAX:	ACCOUNT #:	
VENDOR 2:	CONTACT:		
PAYMENT ADDRESS:	_ CITY/STATE/ZIP:		
PHONE:	_FAX:	ACCOUNT #:	

## **CONDITIONS (TERMS ARE NET 30 DAYS UPON CREDIT APPROVAL)**

TERMS OF SALE, INCLUDING TERMS OF PAYMENT AND CHARGES, FOR EACH PURCHASE ARE AGREED TO BE THOSE SPECIFIED ON THE FACE OF EACH INVOICE. THE CUSTOMER HEREBY AGREES TO PAY ALL COSTS OF COLLECTION OR LEGAL FEES SHOULD SUCH ACTION BE NECESSARY DUE TO NON-PAYMENT. THE ABOVE INFORMATION IS WILLINGLY SUPPLIED AND THE CREDITOR IS AUTHORIZED TO CONTACT THE ABOVE BANK AND TRADE REFERENCES IN ORDER TO ESTABLISH THE CREDITWORTHINESS OF THE ABOVE NAMED COMPANY. IF THE APPLICANT IS NOT A CORPORATION, THE CREDITOR IS AUTHORIZED TO OBTAIN CREDIT REPORTS ON THE PROPRIETORS, PARTNERS OR PRINCIPALS. SHOULD A CREDIT AVAILABILITY BE GRANTED BY THE CREDITOR, ALL DECISIONS WITH RESPECT TO THE EXTENSION OR CONTINUATION SHALL BE IN THE SOLE DISCRETION OF THE CREDITOR. THE CREDITOR MAY TERMINATE ANY CREDIT AVAILABILITY WITHIN ITS SOLE DISCRETION.

DISPUTES: ANY DISPUTE OR CONTROVERSY ARISING FROM THIS AGREEMENT WILL BE RESOLVED BY ARBITRATION BY THE AMERICAN ARBITRATION ASSOCIATION AT NEWTON COUNTY, MISSOURI. THE LANGUAGE OF THE ARBITRATION SHALL BE ENGLISH. THE NUMBER OF ARBITRATORS SHALL BE ONE. THE PARTIES AGREE THE AMERICAN ARBITRATION ASSOCIATION'S EXPEDITED RULES SHALL APPLY AND THEY WAIVE ALL RIGHT TO ANY HEARING REQUIRING WITNESS PRODUCTION. THE ARBITRATOR SHALL ISSUE AN AWARD BASED UPON THE WRITTEN DOCUMENTARY EVIDENCE SUPPLIED BY THE PARTIES. THE ARBITRATOR'S AWARD SHALL BE BINDING AND FINAL. THE LOSING PARTY SHALL PAY ALL ARBITRATION EXPENSES, INCLUDING ALL ATTORNEY'S FEES.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM:		
APPLICANT'S NAME:	TITLE:	
DATE:	APPLICANT'S SIGNATURE:	
FOR PROPRIETORS, PARTNERS, S-CORPORATIONS IN THE U.S.		
	OBTAIN A CONSUMER CREDIT REPORT ON MY CREDIT HISTORYAPPLICANT'S SIGNATURE:	
PERSONAL GUARANTEE		
PROMPT PAYMENT OF ALL INDEBTEDNESS HERET GUARANTEE SHALL NOT BE AFFECTED BY THE AM INDEBTEDNESS. NOTICE OF THE ACCEPTANCE OF OF PAYMENT, AND ANY RIGHT OR DEMAND TO PROGUARANTEE MAY ONLY BE REVOKED BY WRITTEN BY CERTIFIED MAIL. ANY REVOCATION DOES NOT PAYMENT FOR INDEBTEDNESS INCURRED PRIOR	REBY INDIVIDUALLY AND PERSONALLY GUARANTEE THE FULL AND TOFORE OR HEREAFTER INCURRED BY THE ABOVE BUSINESS. THIS IOUNT OF CREDIT EXTENDED OR ANY CHANGE IN THE FORM OF SAID THIS GUARANTEE, EXTENSION OF CREDIT, MODIFICATION IN TERMS OCEED AGAINST THE PRINCIPAL DEBTOR IS HEREBY WAIVED. THIS I NOTICE WHICH SHALL BE SENT TO THE CREDITOR'S CREDIT OFFICE REVOKE THE OBLIGATION OF THE GUARANTORS TO PROVIDE TO THE REVOCATION. I AUTHORIZE THE SELLER AND THEIR ASSIGNS OF CONTACT MY REFERENCES AS NECESSARY. AS GUARANTOR, I AM E.	
GUARANTOR'S NAME:	SIGNATURE:	
HOME ADDRESS:	CITY/STATE/ZIP:	
DATE:	TAX I.D. OR S.S. NO:	
GUARANTOR'S NAME:	SIGNATURE:	
HOME ADDRESS:	CITY/STATE/ZIP:	

\_\_\_\_\_TAX I.D. OR S.S. NO: \_\_\_\_\_