

COMPANY INFORMATION

Company Name				Date	
Street Address			City	State	Zip
Billing Address			City	State	Zip
Phone #	Fax #	Cell #	Email		
Federal Tax ID		Years In Business	Contractor's License		Primary Business
Type of Business Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Government Agency <input type="checkbox"/>					

BILLING INFORMATION

AP Contact		AP Phone #	AP Fax #	Monthly Statement Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	
PO Required? Yes <input type="checkbox"/> No <input type="checkbox"/>		Job Names/#s Required? Yes <input type="checkbox"/> No <input type="checkbox"/>		Requested Monthly Credit Line:	
Invoice/Statement Email Address:			Are You Sales Tax Exempt? Yes <input type="checkbox"/> No <input type="checkbox"/>		*If Yes, Attach Copy of Valid Exemption Form

FINANCIAL INSTITUTION

Bank Name		Account Contact	Phone #	Email	
Account #	Branch Address		City	State	Zip

TRADE REFERENCES / YOUR ACTIVE CREDIT LINES

Company Name	Address	Phone #	Fax #	Account #

OWNERS / OFFICERS / PRINCIPALS / PARTNERS

Name	Social Security #	Home Address	Phone #

Has a tax lien or civil suit been filed against applicant or any of its owners, officers, principals, or partners within the past six years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any of its owners, officers, principals, or partners ever filed a voluntary petition in bankruptcy or been adjudged bankrupt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is applicant or any of its owners, officers, principals, or partners a guarantor or endorser of debts or notes owed by others?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant ever done business with National Wholesale Supply under this company name or any other company name?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

GENERAL TERMS

By submitting this application, you agree that all purchases will be governed by seller's terms and conditions of sale, and that the same may be amended from time to time, which shall apply to all sales and extensions of credit made to the applicant by seller. It is understood that if credit is extended, this account will be paid by the due date, which is net 10th Prox. I realize should I/we fail to comply with payment terms or any check be returned NSF from bank, this account will automatically be placed on COD and any line of credit will be withdrawn. It is further agreed that I/we will pay a service charge of one and one half percent (1 1/2) per month until the account is current. All bills are due and payable in Dallas County, Texas. It is further agreed that National Wholesale offers no warranty other than the manufacturer's warranty and will not be responsible for labor, consequential damages, or back charges which are not covered by the manufacturer's warranty. The Applicant certifies that the information provided is true and correct and has been submitted as a material inducement to obtain commercial credit and agrees to send to the Seller written notice by certified mail of any changes in ownership of applicant's business within thirty days of such changes. I hereby authorize National Wholesale to investigate and verify any information provided and inquire of bank and trade references or others as to ongoing credit worthiness including credit reports from credit bureaus (including consumer reporting agencies).

By signing here, the undersigned warrants the above Commercial Credit Application has been carefully read and the Applicant understands the same.

Title of Authorized Individual	Signature of Authorized Individual	Printed Name of Authorized Individual	Date
--------------------------------	------------------------------------	---------------------------------------	------

PERSONAL GUARANTY

In consideration for the Seller extending credit to the Applicant, the Guarantor(s), jointly and severally hereby guarantee the payment of any obligation of the Applicant to the Seller. Therefore, each Guarantor hereby agrees to pay the Seller on demand, without offset, any sum owed to the Seller by the Applicant. Guarantor further agrees to pay all costs of collection including reasonable attorney's fees. The Guarantor(s) waives notice of execution of this Guaranty. Guarantors further agree that Seller need not seek payment from the Applicant, another guarantor or seek remedies against goods delivered before demanding payment from Guarantor. Performance of this Guaranty shall be at Seller's location as stated in the General Terms above. Guarantor(s) grant permission to Seller to obtain personal credit information from personal references furnished and/or from credit bureau reports. Guarantor may revoke this Guaranty only by providing Seller's Credit Department written notice via certified mail with at least thirty day notice, but revocation shall not relieve Guarantor of obligations incurred prior to receipt of such notice. Guarantor(s) acknowledge that he/she is also bound by the General Terms in this Credit Application.

By signing here, the undersigned warrants the above Commercial Credit Application has been carefully read and the Guarantor understands the same.

Social Security #	Date	Signature	Printed Name
Social Security #	Date	Signature	Printed Name

NATIONAL WHOLESAL SUPPLY INTERNAL USE ONLY

Branch	Class	Salesperson	Managers Signature
--------	-------	-------------	--------------------