



818.347.7700

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apartmenthardware@gmail.com

Credit Application *Page 1*

BUSINESS CONTACT INFORMATION	TITLE	STATE OF ORGANIZATION
	COMPANY NAME	DATE BUSINESS COMMENCED
	PHONE	NUMBER OF PROPERTIES MANAGED
	FAX	CREDIT REQUIREMENTS FOR PER MONTH
	EMAIL	TYPE OF BUSINESS
	ADDRESS	<input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC <input type="checkbox"/> OTHER

BUSINESS & CREDIT INFORMATION	NAME	BANK NAME:
	SOCIAL SECURITY #	PRIMARY ADDRESS
	FEDERAL TAX ID #	CITY, STATE ZIP CODE
	PHONE	PHONE
	FAX	ACCOUNT NUMBER
	E-MAIL	TYPE OF ACCOUNT <input type="checkbox"/> SAVINGS <input type="checkbox"/> CHECKING <input type="checkbox"/> OTHER

BUSINESS / TRADE REFERENCES	COMPANY NAME	PHONE
	ADDRESS	FAX
	CITY, STATE ZIP CODE	E-MAIL
	TYPE OF ACCOUNT	OTHER
	COMPANY NAME	PHONE
	ADDRESS	FAX
	CITY, STATE ZIP CODE	E-MAIL
	TYPE OF ACCOUNT	OTHER
	COMPANY NAME	PHONE
	ADDRESS	FAX
	CITY, STATE ZIP CODE	E-MAIL
	TYPE OF ACCOUNT	OTHER

AGREEMENT	1. The information and statements in this application are true & complete, and are made to establish an open line of credit with <u>Hardware & Apartment Supply</u> .
	2. You are hereby authorized to obtain information you consider necessary from any source concerning the statements in this application.
	3. I (we) agree to pay all invoices in accordance with the terms so stated on such invoices.
	4. By signing this application, I (we) agree to abide by <u>Hardware & Apartment Supply's</u> Credit Terms & Conditions.

SIGNATURES	SIGNATURE	SIGNATURE
	NAME AND TITLE	NAME AND TITLE
	DATE	DATE



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CREDIT TERMS

Invoices are due by the 10th of the following month. Any requests for credits or corrections on invoices should be made by the 10th or cannot be used as a reason for non-payment. Invoices become delinquent on the 20th of the month following purchase. 1.5% per month charged on all past due invoices. If any unpaid invoices reach 60 days old, the account changes to C.O.D. and is no longer in good standing. Accounts not in good standing are subject to regular re-evaluation and change. Hardware & Apartment Supply reserves the right to refuse sale at any time.

REQUIREMENTS

All businesses established with less than 5 years in business must sign a Personal Guarantee. Financial documentation may be required including the past two most recent years' business and personal tax returns. Please sign the Personal Guarantee below if this applies to you. Please attach your financial documentation if you want it considered as part of this application.

PERSONAL GUARANTEE

In consideration of Hardware & Apartment Supply extending credit to the business identified below for any materials and/or services after this date at the request of the applicant(s) or its agent(s), the undersigned individual hereby personally guarantees, unconditionally and irrevocably, the prompt payment of all sums now or hereafter owed to Hardware & Apartment Supply by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between Hardware & Apartment Supply and the business. Hardware & Apartment Supply shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of or any other forbearance which may be extended by Hardware & Apartment Supply.

This guarantee shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by Hardware & Apartment Supply. Said notice shall specify the date on which this guarantee is to be terminated. Said date is not to be less than ten days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

SIGNATURES	SIGNATURE	SIGNATURE
	NAME AND TITLE	NAME AND TITLE
	DATE	DATE

LIST OF AUTHORIZED BUYERS	1.	6.
	2.	7.
	3.	8.
	4.	9.
	5.	10.

LIST OF AUTHORIZED PROPERTIES FOR MAINTENANCE	PROPERTY NAME	PROPERTY NAME
	ADDRESS	ADDRESS
	CITY, STATE ZIP CODE	CITY, STATE ZIP CODE
	PROPERTY NAME	PROPERTY NAME
	ADDRESS	ADDRESS
	CITY, STATE ZIP CODE	CITY, STATE ZIP CODE
	PROPERTY NAME	PROPERTY NAME
	ADDRESS	ADDRESS
	CITY, STATE ZIP CODE	CITY, STATE ZIP CODE

Signature _____ Authorized by (printed name) _____ Date _____