



BRAXTON HARRIS COMPANY, INC.

CREDIT APPLICATION

Applicant - Business or Corporate Name _____ Application Date _____

Business Street Address _____ City _____ State _____ Zip _____

Billing Address: Street or P.O. Box _____ City _____ State _____ Zip _____

Business Telephone No. _____ Year Business Was Established _____ No. of Employees _____

Business Fax No. _____ Resale Permit No. _____ (Please send a copy of your Certificate)

Estimated monthly credit requirements or line of credit requested \$ _____ We are engaged in the business of _____

Business building is Owned Rented Type of business Sole Proprietor Partnership Corporation
 OEM / Manufacturer Wholesaler / Distributer

Purchasing Agent: _____ Email: _____

Manager: _____ Email: _____

THIS SECTION MUST BE FILLED OUT COMPLETELY

OWNERS (If applicant is a Sole Proprietorship or Partnership)

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

OFFICERS (If a corporation)

Name _____ Home Phone _____

Home Address _____

Name _____ Home Phone _____

Home Address _____

Name _____ Home Phone _____

Home Address _____

BANK OR SAVINGS & LOAN ASSOCIATION

Name _____ Account No. _____ Type of Account _____

Branch Address _____ Ph.# _____

Name _____ Account No. _____ Type of Account _____

Branch Address _____ Ph.# _____

APPLICANT'S PRINCIPAL SUPPLIERS ARE: (List at least three) (If new business list credit references of Principals)

Name _____ Address _____ Ph.# _____ Fax# _____

Name _____ Address _____ Ph.# _____ Fax# _____

Name _____ Address _____ Ph.# _____ Fax# _____

Name _____ Address _____ Ph.# _____ Fax# _____

**APPLICANT:
PLEASE COMPLETE AND SIGN REVERSE
SIDE OF THIS FORM.**

Has applicant or any of its Owners, Principals, Partners, Officers, or Directors ever filed a voluntary petition in bankruptcy, been adjudged bankrupt, or made an assignment for the benefit of creditors?

Yes No

Are withholding, FICA, Income and other taxes owed by applicant paid current?

Yes No

Has a tax lien or civil suit been filed against Applicant or any of its Owners, Principals, Partners, Officers, or Directors within the past six years?

Yes No

Total monthly purchases of material and/or merchandise from all sources of supply \$ _____

Does Applicant now have a merchandise order pending with BRAXTON HARRIS COMPANY, INC.?

Yes No

Person to contact, for Sales _____

Person to contact, for Payments _____

Would you like to see a salesperson? Yes No

The information of this credit application is warranted to be true and is given for the purpose of obtaining credit for the above named Applicant from BRAXTON HARRIS COMPANY, INC. Our billing dates run from the first to the end of each month. Invoices are due and payable by the end of the month following the close of a billing period. In consideration of the said extension of credit, Applicant agrees to pay within the terms. All accounts are due and payable at the remittance address shown on the BRAXTON HARRIS COMPANY, INC. invoice. Applicant agrees to pay a service charge computed on the basis of 1-1/2% per month (18% annual rate or the current rate (not to exceed the maximum legal limit in the applicant's state)) of all sums to BRAXTON HARRIS COMPANY, INC. which have not been paid within 60 days from the invoice date. The service charge will be due and payable as assessed and an additional service charge, computed on the same basis, will be due and payable every thirty days thereafter. Waiver of one or more service charge(s) may not be deemed to be a waiver of future service charge(s). It is agreed that, in the event legal action be instituted to effect collection of any unpaid balance due BRAXTON HARRIS COMPANY, INC. from the Applicant, the Applicant will pay all costs of collection, court costs and a reasonable attorneys fees.

I/We understand that I/We have an ongoing liability for the funds due for this account unless BRAXTON HARRIS COMPANY, INC. is notified prior to any change in ownership or controlling interests.

I/We personally guarantee payment for all materials purchased by the above Applicant, and further represent that neither the above Applicant nor the undersigned has ceased to pay its/his debts in the ordinary course of business or affairs, that he/it can pay his/its debts as they become due, and that he/it is solvent within the meaning of the Federal Bankruptcy Act. Applicant and the undersigned represent that Applicant will cease to order materials from BRAXTON HARRIS COMPANY, INC. immediately if the above statements with respect to solvency becomes inapplicable.

You are authorized to check credit information submitted, as well as all other sources available to you, and to answer questions about your credit experience with us when requested by others. The undersigned warrants that the terms and conditions as set forth above have been carefully read and agrees to be bound thereby.

Executed at _____ on this _____ day of _____ Year _____

**Must be signed by Officer(s),
Majority Stockholder,
or Partner(s)**

Name of Applicant

Signed Individually and on behalf of Corporation

Please print name

Applicants Social Security or Federal Tax Number

BRAXTON HARRIS COMPANY, INC. • OFFICE USE ONLY

Date Application Received _____ Account No. _____ Salesman No. _____
Manager Approval _____ Credit Mgr. Approval _____ Entered _____ Credit Limit _____



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