



CREDIT APPLICATION

SALESMAN# _____ ACCOUNT# _____ PRICING _____ OPEN DATE _____
 TERRITORY _____ SIC CODE _____

1. FIRM NAME OR INDIVIDUAL

 STREET ADDRESS _____
 MAILING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 BUYERS NAME _____ PO# REQUIRED? YES OR NO _____
 ACCOUNTS PAYABLE CONTACT _____
 PHONE () _____ FAX () _____
 ****TAX INFORMATION REQUIRED****
 FEDERAL TAX ID# _____ STATE TAX EXEMPT # _____
 SALES TAX: STATE _____ % PARISH _____ % CITY _____ %

2. TYPE OF BUSINESS: INDIVIDUAL _____ CORPORATION _____

PRESIDENT _____
 ADDRESS _____
 VICE PRESIDENT _____
 ADDRESS _____

PARTNERSHIP _____

PARTNERS' NAMES	ADDRESSES
_____	_____
_____	_____
_____	_____

PREFERRED PAYMENT METHOD - ***INFORMATION IS CONFIDENTIAL*******

_____ CASH _____ CHECK _____ AMERICAN EXPRESS _____ DISCOVER _____ VISA
 _____ MASTERCARD _____ CARD# _____
 EXPIRATION DATE _____ NAME ON CARD _____
 ADDRESS _____ ZIP _____

3. **BANK REFERENCES:**

BANK NAME _____

BANK ADDRESS _____

BANK PHONE# () _____ ACCT# _____

4. **BUSINESS / TRADE REFERENCES**

1. NAME _____

ADDRESS _____

2. NAME _____

ADDRESS _____

3. NAME _____

ADDRESS _____

AGREEMENT

1. ALL INVOICES ARE TO BE PAID 30 DAYS FROM THE DATE OF INVOICE.

2. CLAIMS ARISING FROM INVOICES MUST BE MADE WITHIN SEVEN WORKING DAYS.

3. BY SUBMITTING THIS APPLICATION, YOU AUTHORIZE CENLA BOLTS & SUPPLY, LLC TO MAKE INQUIRIES INTO THE BANKING AND BUSINESS/TRADE REFERENCES THAT YOU HAVE SUPPLIED.

I FURTHER ASSUME RESPONSIBILITY FOR ALL BILLS CONTRACTED IN MY NAME AT THE ABOVE ADDRESS, AND DESIGNATE THE FOLLOWING NAMED PERSONS AS THE AUTHORIZED PURCHASING AGENTS AND EMPLOYEES OF THE UNDERSIGNED UNTIL WRITTEN TO THE CONTRARY IS GIVEN:

NAME _____ NAME _____

NAME _____ NAME _____

I PROMISE TO PAY MY BILL IN FULL FOR MONTHLY PURCHASES WITHIN 30 DAYS OF INVOICE DATE. I UNDERSTAND THAT YOUR COMPANY'S CREDIT TERMS ARE: ALL INVOICES DUE 30 DAYS FROM DATE OF INVOICE, AND ARE PAST DUE AFTER THAT DATE. IN THE EVENT I DO NOT PAY MY BILL ON OR BEFORE THE 30 DAYS, MY ACCOUNT IS PAST DUE AND YOUR COMPANY HAS THE RIGHT TO CHARGE INTEREST AT THE RATE OF 1 1/2% PER MONTH UNTIL PAID IN FULL. ALSO, IN THE EVENT IT BECOMES NECESSARY FOR YOUR COMPANY TO INCUR COLLECTION COSTS OR INSTITUTE SUIT TO COLLECT UNDER THIS AGREEMENT, OR ANY PORTION THEREOF, THE UNDERSIGNED PROMISES TO PAY ANY AND ALL ADDITIONAL COLLECTION COST AND SUCH SUMS AS THE COURT MAY ADJUDGE COURT COSTS AND REASONABLE ATTORNEYS FEES IN SAID SUIT.

FIRM _____

SIGNATURE _____

NOTE: ANY CORPORATIONS' REQUEST FOR CREDIT MUST BE GUARANTEED BY A RESPONSIBLE INDIVIDUAL. AS AN INDUCEMENT FOR GRANTING CREDIT TO THE ABOVE NAMED APPLICANT. I HAVE AND DO HEREBY GUARANTEE PAYMENT OF SAID FIRM'S ACCOUNTS WHEN DUE, IN ACCORDANCE WITH THE ABOVE AGREEMENT OF SAID FIRM, INCLUDING ANY AND ALL COST OF COLLECTION AND REASONABLE ATTORNEY'S FEES.

SIGNATURE _____ DATE _____