

THE WALLWORK GROUP

9 Patton Drive, West Caldwell, New Jersey 07006

CONFIDENTIAL CREDIT APPLICATION AND GUARANTEE

For the purpose of obtaining merchandise on credit, we submit the following information. We authorize Wallwork Brothers Inc., trading as The Wallwork Group, to obtain, if it desires, a credit report from any credit reporting agency. We further authorize Wallwork to give any and all necessary information to the agency which will assist them in their investigation.

GENERAL INFORMATION

DATE: _____

Full legal name of business				
Trade name of business (if any)				
Billing Address	City	County	State	Zip + 4 Code
Ship-To Address (if different from billing)				
City				
County				
State				
Zip + 4 Code				
Telephone #	Fax #	Cell #		
Ours is a: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Individual Business				
Name of Owner (#1)		Title		Social Security Number
Home Address		City	State	Zip
Home Telephone		Own or Rent		
Name of Owner (#2)		Title		Social Security Number
Home Address		City	State	Zip
Home Telephone		Own or Rent		
We are primarily a (check one):				
<input type="checkbox"/> Residential Replacement Contractor <input type="checkbox"/> Residential New Construction Contractor				
<input type="checkbox"/> Commercial Design/Build Contractor <input type="checkbox"/> Commercial Plan & Spec Contractor				
<input type="checkbox"/> Plumbing Contractor <input type="checkbox"/> Other Reseller <input type="checkbox"/> User				
We have been established _____ years.			Approx. Annual Sales: _____	
Have you been in business under any other name(s)? Yes <input type="checkbox"/> No <input type="checkbox"/>				
If yes, please list:				

COMPANY FINANCIAL INFORMATION:

Name of primary bank	Account Number	
Bank address	Telephone Number	
Do you own business location? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Name of Mortgage-Holder	Address	Telephone Number

TRADE REFERENCES: (Major Suppliers Only)

Suppliers Name	City	State	Telephone #	Fax #	Acct #
Suppliers Name	City	State	Telephone #	Fax #	Acct #
Suppliers Name	City	State	Telephone #	Fax #	Acct #
Suppliers Name	City	State	Telephone #	Fax #	Acct #

ADDITIONAL INFORMATION:

Do you use purchase orders? Yes <input type="checkbox"/> No <input type="checkbox"/>	Email Address:
Name & title associated with email address:	

Note, you will not be able to purchase certain items containing CFC and HCFC refrigerants unless an EPA approved certificate is submitted.

RELEASE OF PERSONAL FINANCIAL INFORMATION:

OWNER #1

I authorize					
Name of mortgage-holder	Address	City	State	Zip	
to release information to Wallwork on the mortgage on my real estate at:					
Address	City	State	Zip	Mortgage Account Number	
Print Name	Signature			Date	

OWNER #2

I authorize					
Name of mortgage-holder	Address	City	State	Zip	
to release information to Wallwork on the mortgage on my real estate at:					
Address	City	State	Zip	Mortgage Account Number	
Print Name	Signature			Date	

TO BE CONSIDERED, THIS PAGE MUST BE COMPLETED

GUARANTEE

FOR AND IN CONSIDERATION of Wallwork Brothers Inc. (hereinafter referred to as Wallwork), 9 Patton Drive, West Caldwell, New Jersey, 07006, granting credit to the assignees (hereinafter called the customer), said credit being given for our personal accommodation and advantage, we the undersigned, do hereby, individually, jointly and severally guarantee, now and for the future, waiving prior demand and notice of any kind, payment of all accounts, notices, debts and claims of every nature and description, (including third party items offered and endorsed by the customer, and which are accepted on account by Wallwork) which Wallwork now has, or hereafter may have, against the customer.

The fact that Wallwork has granted, or may grant, extension to the customer shall not be a defense to our liability under this guarantee. This guarantee shall remain in full force and effect until notice of revocation from us in writing, sent by registered mail, addressed to the Treasurer of Wallwork, at 9 Patton Drive, West Caldwell, New Jersey, 07006, is received by him or his office. Notwithstanding such notice having been given, we shall not thereby be discharged from any liability of any nature whatsoever incurred under the guarantee up to and including the date of the receipt of such notice by Wallwork, as herein provided.

We agree to pay a Service Charge of 1½% per month (18% per annum) on any amounts unpaid 60 days after invoice date. We agree to pay to Wallwork, without demand, 25% of the debt as attorneys' fees and other expenses incurred by Wallwork, in collecting or compromising any indebtedness of the customer or in enforcing this guarantee against us or any other guarantee. This guarantee shall be construed to have been given at West Caldwell, New Jersey, and shall be interpreted pursuant to the law of the State of New Jersey.

*Owner #1:	Personal Signature	Print Name	Date
** Witness:	Signature	Print Name	Date
*Owner #2: (or spouse)	Personal Signature	Print Name	Date
** Witness:	Signature	Print Name	Date

*** Guarantee must be signed by owners as individuals, not as corporate Officers.
DO NOT PUT TITLE AFTER NAME.**

**** Signature must be witnessed.**

***** INTERNAL USE ONLY *****

Branch #: _____ Salesperson: _____ Processed by: _____ Date: _____