

APPLICATION FOR CREDIT - LETTER WOODHILL SUPPLY, INC.

4665 Beidler Road
Willoughby, Ohio 44094
Phone: (440) 269-1100

1862 E. 123rd Street
Cleveland, Ohio 44106
Phone: (216) 229-3900

a.norris@woodhillsupply.com

Fax completed application to:
Ann M. Norris / Credit Manager
(440) 954-6020 - Phone
(440) 269-1026 - Fax

****** PLEASE NOTE: ALL STARRED ITEMS MUST BE COMPLETED IN FULL OR APPLICATION TIME WILL BE LONGER**

Message: Woodhill Supply's Credit Application. Please complete all the sections as directed.

***** ALL** entries in the "Trade References" section must be completed.
(put "**ATTACHED**" in this section if you are sending a separate credit info sheet.)

***** ALL FAX NUMBERS FOR YOUR REFERENCES MUST BE INCLUDED**

***** AN OWNER, PARTNER OR OFFICER OF YOUR COMPANY MUST SIGN THIS APPLICATION.**

In order to expedite the application, please fax back (with Sales Tax Exemption Certificate, if exempt) to our accounting department at the fax number listed above.

***** PLEASE PRINT AND MAIL THE ORIGINAL CREDIT APPLICATION AND ANY OTHER FORMS TO OUR WILLOUGHBY LOCATION,** address listed above. **(PLEASE NOTE... ORIGINALS MUST BE RECEIVED BEFORE ACCOUNT CAN BE OPENED)** Upon credit approval, we will notify you of the line of credit and terms that we have established for your company.

If you have any questions, please contact me at the telephone number listed above.

Thank you.

Ann M. Norris / Credit Manager
WOODHILL SUPPLY, INC.

APPLICATION FOR CREDIT WOODHILL SUPPLY, INC.

Proprietorship
 Partnership
 Corporation
 [Select One]

Business Name	<input style="width: 95%;" type="text"/>	Telephone #	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>	Fax #	<input style="width: 95%;" type="text"/>
City	<input style="width: 30%;" type="text"/>	State	<input style="width: 15%;" type="text"/>
		Zip Code	<input style="width: 15%;" type="text"/>
Email	<input style="width: 45%;" type="text"/>	Invoice Preference	<input type="radio"/> Email <input type="radio"/> Fax <input type="radio"/> Mail

Personal Information of Proprietor, Partners or Officers:

Name:	<input style="width: 95%;" type="text"/>	Title:	<input style="width: 95%;" type="text"/>	Home Address/Phone	<input style="width: 95%;" type="text"/>
Name:	<input style="width: 95%;" type="text"/>	Title:	<input style="width: 95%;" type="text"/>	Home Address/Phone	<input style="width: 95%;" type="text"/>
Name:	<input style="width: 95%;" type="text"/>	Title:	<input style="width: 95%;" type="text"/>	Home Address/Phone	<input style="width: 95%;" type="text"/>
Federal I.D. #	<input style="width: 20%;" type="text"/>	SSN:	<input style="width: 20%;" type="text"/>	Years in Business	<input style="width: 20%;" type="text"/>
P.O. Required?	<input type="radio"/> Yes <input type="radio"/> No	Type of Business:	<input style="width: 95%;" type="text"/>		
Job Name?	<input type="radio"/> Yes <input type="radio"/> No		(OEM, Mechanical, Plumber, Maintenance, Other)		
Sales Tax Exempt?	<input type="radio"/> Yes <input type="radio"/> No		(If Yes, attach Sales Tax Exemption Certificate)		

BANK REFERENCE

Bank:	<input style="width: 95%;" type="text"/>	Branch:	<input style="width: 95%;" type="text"/>
Address:	<input style="width: 30%;" type="text"/>	Phone:	<input style="width: 20%;" type="text"/>
		Fax:	<input style="width: 20%;" type="text"/>
Acct Type / No.:	<input style="width: 35%;" type="text"/>	Contact:	<input style="width: 30%;" type="text"/>

TRADE REFERENCES

	<u>Business Name</u>	<u>Full Address</u>	<u>Phone and Fax Numbers</u>
1)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
2)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
3)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
4)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

I/We understand and agree that Woodhill Supply, Inc is relying on the accuracy of information furnished above to furnish and deliver merchandise and materials upon credit, or extension of credit. I/We hereby represent that this is a complete and truthful statement. I/We understand and agree that all invoices up to and including the 25th of the month are due for discount (when applicable) on or before the 10th of the month following the purchase. Interest will be added to all accounts at the rate of 1-1/2% per month on any invoices, which are 61 or more days from invoice date.

Printed Name	<input style="width: 95%;" type="text"/>	Title:	<input style="width: 95%;" type="text"/>
Signed By		Date:	

JOINT PERSONAL GUARANTY

Date:

We, and ,

spouse, residing at , for

consideration of your extending at our request credit to

(hereinafter referred to as the "Company"), of which

is , hereby personally guarantee to you the

prompt payment at WOODHILL SUPPLY, INC. in the State of OHIO of any obligation of the

Company and we hereby agree to bind ourselves to pay you on demand any sum which may

become due to you by the Company whenever the Company shall fail to promptly pay the same. It

is understood that this guaranty shall be a continuing guaranty and indemnity for such

indebtedness of the Company. We do hereby waive notice of default, non-payment and notice

thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

This guaranty covers all amounts currently owed as well as any future indebtedness.

IF NOT SIGNING JOINTLY, I REPRESENT I AM NOT MARRIED

Witness: _____
Signature

Witness: _____
Signature