

Credit Application

Full Name of Firm			Date	
Trade Names (if any)			Phone ()	
Street Address			FAX ()	
City	State	Zip Code	Email Address	
Billing Address	State	Zip Code	Taxpayer ID#	
Is this a(n) () Individual () Partnership () Corporation	Number of Years in Business	Type of Business	State of Incorporation	
If Subsidiary, Name, City & State of Parent			Accounts Payable Supervisor	

Credit Line Applied For (Please Attach Financial Statement)

\$200 - \$500 \$1,500 - \$2,000 Other Are Purchase Orders Used?
 \$500 - \$1,000 \$2,000 - \$2,500 \$ _____ Yes No

Sales Tax: _____ Exempt (If Exempt, Attach Certificate with Number)

Owner, Partner, or Principal Officer	Social Security Number
Home Address	Home Phone ()
Owner, Partner, or Principal Officer	Social Security Number
Home Address	Home Phone ()
Owner, Partner, or Principal Officer	Social Security Number
Home Address	Home Phone ()

Trade References (Preferably Building Material or Construction Related)

Name	Amount of Credit Line	Phone ()
Street Address	City	State Zip Code
Name	Amount of Credit Line	Phone ()
Street Address	City	State Zip Code
Name	Amount of Credit Line	Phone ()
Street Address	City	State Zip Code
Name	Amount of Credit Line	Phone ()
Street Address	City	State Zip Code

Bank Reference (Give Your Primary Bank)

Name	Phone ()	Account/Loan Officer
Street Address	City	State Zip Code
Business Checking Account Number	Open Loan Account Number	Present Balance Owing
Amount of Credit Line	<input type="checkbox"/> Secured <input type="checkbox"/> Unsecured	If Secured, Describe Collateral

**** PLEASE COMPLETE AND SIGN REVERSE SIDE OR SECOND PAGE OF FORM ****

Terms and Conditions

Applicant, in consideration of any extension of credit heretofore or hereafter granted by one or more of the Companies, warrants the above information to be true, complete and accurate and hereby agrees to the following terms and conditions:

1. Applicant authorizes the Companies to make inquiry and to gather additional credit information from any source and hereby authorizes such source or sources to answer such inquiry with true, accurate, and complete information about Applicant.
2. Payment is due within thirty (30) days from date of invoice.
3. Any amount unpaid after thirty (30) days is delinquent and Applicant agrees to pay a finance charge of the lesser of 18% per annum (1½% per month) or the highest rate permitted by applicable law on any amounts unpaid after thirty (30) days.
4. Applicant authorizes any of the Companies who at any time are indebted to the Applicant to deduct such indebtedness from sums at any time owing by Applicant to the Company or any other of the Companies.
5. Any extension of credit is and shall be at the sole discretion of any of the Companies; none of the Companies is or shall be obligated to extend any credit to Applicant and the extension of credit by one or more of the Companies on one or more occasions shall not obligate any of the Companies to extend any additional credit.
6. Applicant agrees to notify the Companies in writing of any change in ownership of Applicant and of the occurrence of any event which has had or may have a material and adverse effect on the Applicant, its business, or prospects.
7. Applicant agrees to pay all costs of collection incurred by any of the Companies including reasonable attorneys' fees whether or not suit is brought.

If you agree to the foregoing terms, please so indicate by signing below:

Date: _____ Firm Name: _____

By: _____

It's _____ duly authorized

GUARANTY

In consideration of any extension of credit to the above Applicant by any of the Companies listed above, I/we hereby, jointly and severally, if more than one, personally guarantee(s) prompt payment when due of any and all debts, liabilities, and obligations heretofore or hereafter incurred to any of the aforesaid Companies by the above Applicant hereby waiving all suretyship defenses and agree(s) to pay all costs and expenses, including reasonable attorneys' fees in enforcing this Guaranty.

Any of the undersigned may terminate this guaranty as to any of Applicants debts, liabilities, and obligations to any of the Companies which are incurred five (5) or more days after such Company receives written notice of such termination sent by certified mail, return receipt requested; provided, however, that any Companies shall not effect (a) such terminating guarantor's responsibility for debts of Applicant incurred prior to the expiration of said five (5) day period; (b) the responsibility of any other guarantor; or (c) such terminating guarantor's responsibility for debts of Applicant to any of the Companies to whom no such notice shall have been sent.

(Witness)	(Date)	(Guarantor)
(Witness)	(Date)	(Guarantor)
(Witness)	(Date)	(Guarantor)

FOR OFFICE USE ONLY

Approved By	Disapproved By	Terms of Payment
Limit	Date	Discount
		Net

Grst, Inc.
DBA Grand Rental Station
Capital Events
115 woodwinds Industrial Ct.
Cary, NC 27511