SECOR

CREDIT APPLICATION

Please fill out completely - Gray areas for SECOR use only

Please return completed forms to Kelley Sandlin at k.sandlin@secoronline.com OR fax to 281-647-7620

Customer #: Approved For / By:

*Orders MUST be Pre-Paid by Credit Card or Wire Transfer until Credit Application is approved (If paid by check, order will NOT ship until check has cleared)

Credit will NOT be extended for any orders totaling less than \$5000.

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Legal Name of Company:	ī						
Trade Name (dba):							
Accounts Payable Contact:				Taxpayer FEI #	: <u></u>		
Phone:		Fax	•	A/P E-mail	:		
Billing Address:		_		_			
City, State, Zip Code:	·						
# of Employees:		Yrs. In Business:		Type of Business:			
Resale Certificate Number:		_	(Please attach copy)	Company Website	e:		
☐ Purchase Order	Required	☐ Purchase Order No	_	□ Not Exempt	☐ Exempt *(Please At	tach Proof of Exemptic	on)
	BANK REF				BANK REFERENCE		
Name/Address				Name/Address		-	
City	State		_	City		State	
Zip Code	Country	-	_	Zip Code		Country	
Bank Officer				Bank Officer	-		
Phone	Fax			Phone			
Account #				Account #			
☐ Checking		☐ Savings			☐ Checking	□ Sav	rings
	TRADE RE	FERENCES		1 F	TRADE REFERENCE	 :S	
Company Name				Company Name		_	
				Address			
Address				Address			
City	State		_	City	-	State	
Zip Code	Country		_	Zip Code		Country	
Contact				Contact			
Phone	Fax (Required)			Phone/Fax (Required)			
Account #				Account #			
				_			
	TRADE RE	<u>FERENCES</u>			TRADE REFERENCE	<u>.s</u>	
Company Name				Company Name	-		
Address				Address			
City	State		_	City		State	
Zip Code	Country		_	Zip Code		Country	
Contact				Contact	-		
Phone	Fax (Required)			Phone/Fax (Required)			
Account #				Account #			
The person(s) supplying the above inf				ers/Guarantors authorize Seller ation shall be as valid as the ori		rsonal credit status, in	cluding
Signature:				Title:			
Printed Name:				Date:			
-							

Customer's acknowledgement and agreement to all of Secor's Policies and General Terms & Conditions is a material term and continuing condition of becoming and remaining a SECOR Customer and/or to obtain credit from SECOR.

	СОГ	RPORATE GUARANTEE	
IN CONSIDERATION of credit financial	l accommodations extended, to	b be extended or continued to	("Borrower")
hereby jointly, severally and uncondi- every nature whatsoever against Born and all expenses and attorney's feed financial accommodations concurred acceptance hereof and shall not be re-	tionally guarantee to seller, the rower now or hereafter existing s incurred by Seller in enforci ntly herewith or hereafter m evoked by 1. the death of the	e payment of each and every claim, de g due or to become due to or held by So ng this agreement. This is a continuir ade by Seller to Borrower shall be c Guarantor(s); 2. the sale or transfer of	valuable considerations, the undersigned, do mand indebtedness, right or cause of action of eller, together with all accrued interest and any ng Guarantee and all extensions of credit and onclusively presumed to have been made in purchaser subsequent to the execution of this purchaser. The undersigned waive notice of
dishonor or nonpayment thereof, co payment thereof or other notice to, governed solely by the laws of the St	ollection or instigation of suit, or demand of payment there tate where seller has its place	or any other action by Seller in collectefore on any party. The interpretation	t and demand for payment thereof, notice of tion thereof including any notice of default in an and enforcement of this Guarantee shall be the event of any dispute over this Guarantee, e seller has its place of business.
open accounts and accounts stated,	against the above-named prop nty shall remain in full force ar	rietorship, partnership, individual, or c nd effect regardless of whether the abo	f Seller, including claims relating to goods sold, orporation. It is understood and agreed by the ove-named corporation, partnership, individual,
The guarantor signature(s) below me	ust be dated and witnessed.		
		, (State)	this the
day of		, 20	
Guarantor Signature:			
Guarantor Printed Name:			
Address:			
City:		State	Zip Code
Driver's License #:		State	_

Witness Printed Name:

Customer's acknowledgement and agreement to all of Secor's Policies and General Terms & Conditions is a material term and continuing condition of becoming and remaining a SECOR Customer and/or to

(Attach Copy)

EIN / SS #:_____

Witness Signature:

In witness whereof, I/we have signed, sealed and delivered this guaranty for the purposes set forth above on the day of:

obtain credit from SECOR.

Please view SECOR's Policies and General Terms & Conditions