

CHRIS - MORE INCORPORATED

MEMPHIS BRANCH / 1324 SPRINGBROOK AVE., P.O. BOX 16746
MEMPHIS, TENNESSEE 38186-0746
BUS (901) 332-8120
FAX (901) 398-8285

APPLICATION FOR CREDIT

BRANCH _____ SALESMAN _____

COMPANY NAME _____

STREET ADDRESS _____

MAILING ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE NUMBER _____ FAX NUMBER _____

E-MAIL ADDRESS _____

CHECK APPROPRIATE LINE AND FILL IN ALL BLANKS

PROPRIETORSHIP _____ PARTNERSHIP _____ CORPORATION _____ MUNICIPALITY _____

YEAR BUSINESS STARTED _____ YEAR INCORPORATED _____

INCORPORATED IN STATE OF _____

PLUMBING CONTRACTOR _____ MECHANICAL CONTRACTOR _____ HVAC _____

STATE CONTRACTOR _____ SERVICE CONTRACTOR _____ OTHER _____

LICENSE NUMBER _____ STATE OF LICENSE _____

ACCOUNTS PAYABLE CONTACT _____ TELEPHONE NUMBER _____

FAX NUMBER _____ E-MAIL ADDRESS _____

FAX INVOICES? YES ___ NO ___ ESTIMATE OF MONTHLY CREDIT LINE _____

PURCHASE ORDER NUMBER REQUIRED? YES ___ NO ___ JOB NUMBER? YES ___ NO ___

HOW MANY COPIES OF EACH INVOICE DO YOU REQUIRE? _____

TAX EXEMPT? YES ___ NO ___ TAX EXEMPTION NUMBER _____

COPY OF YOUR TAX EXEMPTION CERTIFICATE MUST BE PROVIDED OR SALES TAX

*******WILL BE CHARGED.*******

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OWNER(S), PARTNERS OR CORPORATE OFFICERS:

1. _____ TITLE _____ SOC.SEC.# _____
2. _____ TITLE _____ SOC.SEC.# _____
3. _____ TITLE _____ SOC.SEC.# _____

BANK REFERENCES:

NAME OF BANK	BANK OFFICER	TELEPHONE NUMBER	ACCOUNT NUMBER
1. _____			
2. _____			

TRADE REFERENCES:

NAME	ADDRESS	TELEPHONE NUMBER	ACCOUNT NUMBER
1. _____			
2. _____			
3. _____			
4. _____			

PLEASE READ CAREFULLY APPLICATION MUST BE SIGNED AND DATED

I (we) understand that the information furnished on this application is for the purpose of obtaining credit from Chris-More, Inc. and that I (we) are authorized to bind my (our) firm accordingly, and that all accounts or monies due Chris-More, Inc. shall be due and payable at its offices in Memphis or Nashville
Further, that payment terms allow 2% cash discount if remittance is received by the 15th of the month following date of purchase. All invoices not discounted as described above become due NET on the last business day of the month following date of purchase. Service charges on any account thirty days past due shall accrue at the rate of 1.5% per month (18% annual). If the account is placed in the hands of an attorney for collection, the undersigned agrees to pay all expenses, including reasonable attorney's fees and court cost. I (we) waive notice of sale and delivery of goods, extension or rearrangement of terms. I (we) acknowledge and agree to these terms.

NAME _____ DATE _____

NAME _____ DATE _____

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PERSONAL GUARANTEE

In consideration of credit being extended to the firm or individual making this application for credit, and/or in consideration for that credit previously extended, which outstanding obligation I specifically agree to unconditionally guarantee, I (we) or any and all heirs, executors and administrators agree to unconditionally guarantee the entire above mentioned obligation as a primary obligation and not a secondary one. I (we) further agree that this guaranty is an absolute, complete and continuing one and is payable and performable at the offices of Chris-More, Inc. in Memphis or Nashville, upon the same terms described above. If the account is placed in the hands of an attorney for collection, the undersigned agrees to pay all expenses, including reasonable attorney's fees and court costs. I (we) may be sued without demand or joinder of any others as to amounts owing by the firm or individual making this application.

PERSONAL CREDIT CHECK

Signature below gives authorization to Chris-More, Inc. to request personal financial information from their credit management organization.

DENIAL RIGHTS

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Tommy Hurst at the address and telephone number on the statement within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your written request for the statement.

EQUAL CREDIT OPPORTUNITY ACT

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this credit is the Federal Trade Commission, Division of Credit Practices, 6th and Pennsylvania Ave. NW, Washington, D.C. 20580.

PLEASE READ CAREFULLY By signing you agree to all the terms and conditions as stated above.

NAME _____ DATE _____

NAME _____ DATE _____