

Internal Use

Account #: _____ Credit Limit: _____
Sales ID: _____ Territory ID: _____ Date: _____



Account Set Up Or Application For Credit Terms

COD ONLY

Company Name: _____ **Credit Line Requested:** _____

Trade Name/DBA: _____

BILLING ADDRESS

Street: _____ PO Box: _____

City: _____ State: _____ Zip: _____

AP Contact: _____ Title: _____ Phone: _____

Fax: _____ Email: _____

SHIPPING INFORMATION (If more than one ship-to address, please attach additional pages with information)

Street: _____ Is this a residential address? Yes No

City: _____ State: _____ County: _____ Zip: _____

Purchasing Contact: _____ Title: _____ Phone: _____

Email: _____

ORGANIZATION INFORMATION

LEGAL STATUS: Proprietorship Partnership Corporation - *State of Incorporation* _____

Other *Please describe* _____

Date Business Began: _____ Federal I.D. #: _____ DUNS#: _____

Do you require Purchase Orders for all orders? Yes No *Special instructions:* _____

Drivers Lic #: _____ (*Please provide a copy for our records*)

Pesticide Applicator Lic #: _____ State: _____ Expiration Date: _____

Certificate Category (s): _____ (*Please provide copy of appropriate certificate*)

Liability Insurance Company Name: _____ Policy #: _____

Are you exempt from sales tax? Yes No (*If yes, please provide copy of appropriate certificate*)

Tax Exemption #: _____ Resale #: _____

Chief Executive Officer: _____ Chief Financial Officer: _____

OWNERS OR PRINCIPALS (*Must provide social security # of owner if sole proprietorship*)

Name: _____ Title: _____ Address: _____ SS#: _____

Name: _____ Title: _____ Address: _____ SS#: _____

BANK REFERENCE

Bank Name: _____ Checking Acct #: _____

Street: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____ Email: _____

Do you borrow? Yes No Loan Acct # _____

TRADE REFERENCE

Company Name: _____ Acct #: _____

Street: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____ Email: _____

TRADE REFERENCE

Company Name: _____ Acct #: _____

Street: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____ Email: _____

Account Set Up Or Application For Credit Terms

WEBSITE ACCOUNT ACCESS

Requested User ID: _____ Requested Password: _____
 Email - email you wish associated with website login (*Required for website setup*): _____

TERMS AND CONDITIONS OF SALE

Unless otherwise agreed to by both parties in writing, this credit application and agreement shall be deemed to comprise the entire agreement between Target Specialty Products, and any of its affiliated and subsidiary companies (hereafter referred to as "The Company,") and The Applicant identified on the credit application. This document supersedes any and all prior communications and agreements between the parties. All purchase orders issued by The Applicant to The Company are subject to these terms and conditions of sale as if such provisions were fully set forth in such purchase orders. Payment terms are Net 30 days from invoice date or as otherwise specified on each invoice. The Applicant agrees to pay The Company all invoice amounts when due, and all costs incurred by The Company in collecting such amounts, including without limitation: legal fees, expenses, and interest on all outstanding amounts from and after the payment due date at a rate of 1.5% per month (18% annually). In no event will the interest charged exceed the maximum rate allowed by law. The Applicant hereby grants The Company a security interest over all present and future acquired products securing payment of all indebtedness described in this agreement as well as performance of all the obligations of The Applicant to The Company. The Applicant will provide further assurance and take all further steps required to perfect the security interest herein. The Company is hereby authorized to file any lien available to vendors and/or applicators of the products in the manner provided by applicable law notwithstanding the terms of the invoices or other documents or the existence of an event of default. The Applicant will be assessed a 35.00 fee for any returned checks. The Company shall have the right to apply any monies due from The Applicant under any contract between The Company and The Applicant toward the payment of any sums which The Applicant may now, or hereafter, owe to The Company under any agreement. In the event that The Applicant defaults on payment to The Company, The Company shall have the right to withhold any unpaid sums due by The Company to The Applicant under any contract with The Applicant and to apply such sums to the amount owing by The Applicant to The Company. In the event goods are returned for credit or due to default of payment, a 15% re-stocking fee will be charged. The Company has the right to revoke or change terms at its own discretion. Any claim for incorrect pricing, short shipment, or damaged merchandise should be made within 48 hours of receipt of invoice. The Company will not recognize claims made after this period.

GUARANTEE

The undersigned (jointly and severally), in consideration of your extending credit to the above, do hereby unconditionally guarantee payment of all indebtedness, liabilities or obligations said applicant shall at any time owe to Target Specialty Products or any of its subsidiary or affiliated companies. This guarantee shall be a continuing, absolute and unconditional guarantee and shall remain in full force and effect until expressly revoked by a written notice from the undersigned sent by certified mail, return receipt requested and also until all of said indebtedness, liabilities and obligations, created before Target Specialty Products receives such notice, have been paid in full.

This guarantee extends to and includes any and all interest due or to become due together with any and all costs and expenses, including but not limited to collection agency fees, reasonable attorney fees and court costs incurred by Target Specialty Products or its affiliates or subsidiaries, in connection with any matter covered by this guarantee. The undersigned hereby consents to the jurisdiction of the Courts of the State of Michigan.

Guarantor's Signature (no titles): _____

Guarantor's Printed Name: _____

Date Signed: _____

SS#: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

CONFIRMATION (Required)

As an officer or authorized agent for The Applicant, I hereby warrant and represent that the information provided herein is accurate and correct. I have authority to execute this document, and The Applicant Company agrees to be bound by the terms and conditions of sale set forth above. I also authorize release of necessary bank and credit information to Target Specialty Products, or any of its subsidiary and affiliated companies. Information gleaned will be held in strict confidence.

Signature: _____

Printed Name: _____

Date: _____