



BUSINESS CREDIT APPLICATION

ADS Distributors
5215 Highway Ave.
Jacksonville, FL 32254

COMPLETE BUSINESS NAME: _____

FICTITIOUS BUSINESS NAME: _____

Corporation Date: _____ State: _____ Partnership Proprietorship

Sales Tax Exemption #: _____ D & B #: _____

BUSINESS ADDRESS: _____

MAILING ADDRESS (IF DIFFERENT): _____

YEARS IN BUSINESS: _____ **YEARS AT THIS LOCATION:** _____

NATURE OF BUSINESS: _____

FEDERAL TAX I.D. (or SSN): _____

BUSINESS PHONE: _____ **BUSINESS FAX:** _____

ACCTS. PAYABLE CONTACT: _____ **PHONE:** _____

ACCTS. PAYABLE CONTACT EMAIL: _____

OWNER(S) / PRINCIPLE(S) NAMES	COMPLETE ADDRESS / HOME PHONE #

NAME OF BANK: _____

ADDRESS: _____

CHECKING ACCT. _____ **SAVINGS ACCT. #:** _____

PHONE: _____ **FAX:** _____

REFERENCES (PLEASE DO NOT PROVIDE NON-INVENTORY TYPE; SUCH AS UTILITIES, PHONE, OR CREDIT CARD COMPANIES)

BUSINESS NAME	CITY & STATE	PHONE & FAX OR EMAIL

CREDIT TERMS

1. The applicant certifies that all information attained in this credit application is true and correct.
2. The applicant consents to the obtaining of credit and other information as may be used any time in connection to the customers account hereby applied for and to the disclosure of any credit information concerning the applicant and its principals.
3. The applicant agrees to all terms and conditions, and by submitting and signing this application agrees to prompt and full payment on any indebtedness regarding the account.
4. Terms of service are stated on page two of application.
5. A service charge of \$35 will be billed for any checks returned unpaid by the bank for any reason.
6. In the event the account is turned over to an attorney or other agency for collection, or suit is brought on same, or the same is collected through any judicial proceeding whatsoever, applicant shall pay all reasonable attorney's fees and court costs incurred by ADS Distributors or any of its subsidiaries and affiliated entities.

The undersigned has read and accepted the above credit terms and conditions.

OFFICER SIGNATURE: _____ **DATE:** _____

PRINT NAME: _____ **TITLE:** _____

PERSONAL GUARANTEE

The undersigned agrees to act as a personal guarantor and co-signer to this agreement for all debts incurred both now and in the future for all monies owed by the Company, Persons, or Corporations who have signed this credit application and who have been extended credit both now and in the future. Guarantor recognizes, understands, and agrees that this guarantee cannot be revoked or rescinded if any balance remains owed and outstanding to the Vendor and Guarantor hereby waives their subrogation or recovery rights.

GUARANTOR SIGNATURE: _____ **DATE:** _____