A·R·CHAMBERS
SATISFACTION & INTEGRITY SINCE 1945

CREDIT APPLICATION AND AGREEMENT

ALL INFORMATION MUST BE PROVIDED (TYPED OR PRINTED)

Your Company's Legal Name: _____.

Legal composition (Circle one):   Corporation   Sole proprietorship   Partnership   LLC

Name of owner(s): _____

Officers if a corporation: President: _____ VP: _____

    Treasurer: _____ Secretary: _____

Complete business address: _____

_____

Telephone No. (_____) _____ Fax No. (_____) _____

County: _____Tax ID No. _____

Circle One: Taxable   Non-taxable (If non-taxable, Tax exempt certificate must be attached)

BANKING INFORMATION:

Name of Bank: _____ Account no.: _____
Telephone no. (_____) _____ Contact: _____

TRADE REFERENCES   (Please include company name, telephone number and fax number)

1) _____Phone (____) _____ Fax (____) _____
2) _____Phone (____) _____ Fax (____) _____
3) _____Phone (____) _____ Fax (____) _____
4) _____Phone (____) _____ Fax (____) _____
Purchase Order required: YES   NO   (Circle One)
Special instructions requested: _____

NOTE: *THE FOLLOWING AGREEMENT MUST BE SIGNED AND RETURNED TO THE A. R. CHAMBERS SUPPLY, INC. WHEN THE CREDIT APPLICATION IS ACCEPTED, THIS AGREEMENT WILL BE SIGNED BY A. R. CHAMBERS SUPPLY, INC. AND A COPY WILL BE RETURNED TO YOU.*

CREDIT AGREEMENT ON REVERSE SIDE MUST BE COMPLETED

CREDIT AGREEMENT: _____(hereinafter "Customer")
[Insert your company Name]
and A. R. CHAMBERS SUPPLY, Inc.(hereinafter "Chambers"), in consideration of the mutual covenants contained herein and intending to be legally bound hereby, agree as follows:

CREDIT INFORMATION: All information on the foregoing Credit Application is furnished on a confidential basis in support of Customer's request to make commercial purchases on credit. Customer certifies that the information furnished is true and correct and acknowledges that any information omitted or misstated may cause its request for credit to be denied by Chambers. Customer authorizes Chambers to investigate the References and Bank listed as well as other credit sources pertaining to Customer's credit history and financial condition.

RETURN POLICY: No material is returnable by Customer to Chambers without prior authorization. If return authorization is granted, Customer agrees to a 20% restocking charge.

CREDIT TERMS: Credit Terms are "1% 10 days; Net 30." That is, Customer may deduct 1% of the purchase price if paid within 10 days of invoice date. Otherwise, full payment is due within 30 days of invoice date. Customer shall have a credit limit of $_____ , and agrees not exceed said limit or the unpaid balance shall immediately become due and payable. Customer agrees to pay a service charge of 1½ percent per month (18% per year) on all balances that are not paid within 30 days of invoice date. Furthermore, Customer agrees to pay any and all collection expenses, including attorneys' fees, that may become necessary to effect collection of the account should Customer become delinquent. Credit accounts paid by Credit Card are subject to an additional 2% convenience fee.

Customer's Legal Name: _____

Dated: _____   _____
                                        Customer's Authorized Signature and Title

Dated: _____   _____
                                        Chambers's Authorized Signature

* *

PERSONAL GUARANTY: I, the undersigned, for and in consideration of Chambers extending credit to Customer as set forth above, and intending to be legally bound hereby, personally guarantee the prompt payment of all obligations of Customer to Chambers, whether now existing or hereinafter incurred, and agree to pay on demand any sum which is due to Chambers by the Customer including accrued services charges and collection expenses including attorneys' fees. I understand that this guaranty is absolute, continuing, and irrevocable, except as to purchases made by Customer after Chambers has received my written notice of withdrawal of this guaranty. I expressly waive presentment, demand, protest, and notice of protest, dishonor, and notice of default or nonpayment. I further waive any right to require Chambers to proceed first against the Customer for payment of any delinquency.

Dated: _____   _____
                                             [Guarantor's Signature]

Print Guarantor's Name: _____

☐ Check here to receive invoices and statements via e-mail.

    Preferred e-mail: _____