

NOTICE: APPLICATION CANNOT BE PROCESSED IF NOT COMPLETED AND SIGNED



4005 Carnegie Avenue
Cleveland, Ohio 44103

Phone (216) 432-1600 • FAX (216) 432-0800

**APPLICATION
FOR CREDIT**

PLEASE PRINT OR TYPE

Date _____

Billing Address

Name _____ Phone () _____

Address _____ Fax () _____

City, State, Zip _____

Date Established ____/____/____ Federal ID No. _____

Ship To Location

Address _____

City, State, Zip _____

Type of Business (Check One) Corporation ____ Partnership ____ Proprietorship ____ Other ____

If Corporation, Year and State _____

Principals

Name _____ **Title** _____

Street Address _____ Home Phone () _____

City _____ State _____ Zip _____ SS# _____ DOB

Name _____ **Title** _____

Street Address _____ Home Phone () _____

City _____ State _____ Zip _____ SS# _____ DOB

Nearest relative not living with you _____
NAME ADDRESS PHONE

TRADE REFERENCES (You MUST include a fax number)

Supplier _____ Phone () _____

Street Address _____ Fax () _____

City _____ State _____ Zip _____ Acct. No. _____

Supplier _____ Phone () _____

Street Address _____ Fax () _____

City _____ State _____ Zip _____ Acct. No. _____

Supplier _____ Phone () _____

Street Address _____ Fax () _____

City _____ State _____ Zip _____ Acct. No. _____

PAYABLE INFORMATION

Line of Credit Requested \$ _____

Contact _____ Title _____ Phone () _____

Are purchase orders required to charge your account? Yes ____ No ____

Bank Name _____ Branch _____ Address _____

Bank Contact _____ Title _____ Phone _____

Bank Account No. _____

Loan Amount _____ Secured _____ Unsecured _____

Loan Amount _____ Secured _____ Unsecured _____

Describe Type of Business _____

<p>Are You Tax Exempt?</p>	<p>_____ (YES) YOU MUST ENCLOSE COPY OF EXEMPTION</p> <p>_____ (NO) WHAT IS YOUR TAX RATE? _____%</p>
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In consideration of the extension of credit by Fashion Wallcoverings, Inc. the undersigned purchaser agrees that the terms and conditions of all sales are as follows:

- *Terms of Sale are Net 30 Days.*
- *Invoices Not Paid Within 30 Days are Past Due.*
- *Acceptance of the Invoice Without Notice of Protest Within Ten (10) Days Therefrom Shall Be Considered as Evidence and Acceptance of Delivery of Goods.*
- *Finance Charge of 2% per Month per Invoice Over 60 Days Will Be Charged.*

Has the firm or any of its principals ever been bankrupt? YES ____ NO ____

If Yes, explain: _____

Will owners, principals, partners, officers, or directors guarantee the obligation of this business if required?

YES _____ NO _____

Will the undersigned be willing to furnish a current audited financial statement if required?

YES _____ NO _____

THIS IS NOT A PERSONAL GUARANTY:

I hereby represent that I am authorized to submit this application on behalf of the customer named above, and that the information provided is for the purpose of obtaining credit and is warranted to be true. I/we hereby authorize Fashion Wallcoverings, Inc. to investigate the references listed pertaining to my/our credit and financial responsibility. It is agreed and understood that all necessary collection and legal expenses and interest (at state maximum) may be charged to debtor in the event of default or failure to pay for goods sold and delivered. Should legal proceedings become necessary I agree to the jurisdiction of Ohio. I/we further represent that the customer applying for credit has the financial ability and willingness to pay all invoices within established terms.

SIGNATURE _____ **Title** _____ **Date** _____

SIGNATURE _____ **Title** _____ **Date** _____

BLANKET CERTIFICATE OF EXEMPTION

The undersigned hereby claims exemption to purchases of tangible personal property from

_____ on and after
(Name of Vendor)

_____ and certifies that this claim is based upon the
(Date)

purchaser's proposed use of the items purchased, the activity of the purchaser, or both, as shown hereon:

PURCHASER MUST STATE STATUTORY REASON FOR CLAIMING EXEMPTION OR EXCEPTION

This certificate shall continue in force until revoked and shall be considered a part of each order given to the above named vendor unless the order specifies otherwise.

(Purchaser's Name)

(Purchaser's Activity, i.e., Manufacturer, Public Utility, Church, etc.)

(Purchaser's Address)

(By - Signature and Title)

(Date Signed)

(Vendor's License, if any.)

INDIVIDUAL PERSONAL GUARANTY

Date _____

I, _____, residing at _____
(SS#) _____ for, and in consideration of Fashion Wallcovering's
extension of credit at my request to (company name) _____ (hereafter
referred to as the "Company") of which I am (title): _____ hereby person-
ally guaranty to Fashion Wallcoverings payment of any obligation that the Company has to Fashion
Wallcoverings and, I hereby agree to bind myself to Fashion Wallcoverings on demand any sum which
may become due to Fashion Wallcoverings for such indebtedness of the Company. I do hereby waive
notice of default, nonpayment and notice thereof and consent to any modification or renewal of the
credit agreement hereby guaranteed.

I, the undersigned guarantor, further agree to pay, in the event the amount becomes delinquent and
is turned over to an attorney for collection, attorney's fees allowable by law, interest at the rate of
18% per annum and all attendant costs.

Signed _____

Date _____

Print _____

Witness _____