

GALVAN INDUSTRIES, INC.
P.O. BOX 369
HARRISBURG, NC 28075-0369
704-455-5102 (phone)
704-455-5215 (fax)

NEW ACCOUNT APPLICATION FORM

Name: _____ Date: _____

Phone: _____ Fax: _____ SSAN (or Fed ID#) _____

Mailing Address: _____ City: _____

State, Zip _____ Is this location a branch? _____

Where is main office? _____

From where are payments made? _____
(location, phone number, accounts payable contact)

Date company started _____ Net Worth _____ Sales last year _____

Sales Tax exemption#, if any (please send copy of certificate) _____

Description of business _____

Do you pay by: Statement _____ Invoice _____ Anticipated credit _____

Ownership: Corporation () Partnership () Proprietorship ()
Officers, Partners or Owner: _____

Member of Buying Group (which one if appropriate) _____

Trade References (Name, address, phone number, fax number, account #)

1. _____

2. _____

3. _____

(no credit cards please)

******PLEASE READ CAREFULLY******

The person, corporation, or firm, whose name appears on the reverse side, and to whom an open line of credit is extended, will be notified in writing, advising of the amount of credit extended. All applications approved for credit are governed by the following:

1. No shipments will be made to any account, on an open basis, that will cause an account to exceed the established line of credit.
2. If an account reaches 60+ days past due orders are subject to hold until the account is current.
3. A service charge on the past due balance will be charged.
4. A \$25.00 handling charge is assessed to checks returned marked NSF.
5. That the foregoing statements and accompanying financial statements are correct and were provided to induce Galvan Industries to extend open credit to the person, firm or corporation applying.
6. That payments will be made in accordance with the terms so stated on each invoice.
7. That in the event of non payment and the institution of legal proceedings, the person, firm, or corporation to whom open account was extended agrees to bear the expense of all legal proceedings plus a reasonable attorney's fee.
8. That advance notice will be given to Galvan Industries of any change in the business structure. In other words incorporation, changed ownership, etc. that without such notice the original principals to whom credit was extended shall remain liable. Notice to be given by certified or registered letter and acknowledged by return receipt.
9. Credit policies are subject to change at the discretion of the credit department. Upon acceptance of this application, and the issuance of an open line of credit, THE APPLICANT agrees to abide by the credit policies of Galvan Industries.
10. That permission is granted as evidenced by my (our) signature(s) below, for Galvan Industries or its agents to contact the references listed hereon, or any other source for the purpose of obtaining credit information. That the creditor, bank, or lending institution contacted has my (our) permission to furnish Galvan Industries with any and all information requested.
11. In the event of suit, venue shall be in North Carolina.

Signature of office, partner, or owner _____

Title _____ Date _____

******PERSONAL GUARANTY******

In order to induce Galvan Industries of Harrisburg, NC to extend credit to _____, I/we hereby guarantee the payment of any account due or to become due by said company to Galvan Industries including reasonable attorney's fees which might be incurred in the collection of such account. This guaranty shall include all merchandise sold by _____ to _____ and shall include all past due balances, current balances, and future sales hereafter extended by Galvan Industries to _____. This guaranty shall remain in full force and effect until revoked in writing by the maker hereof in the same manner by which this guaranty has been made. Each guarantor hereby waived any claim, right, or remedy which performance in any claim, right or remedy of Galvan Industries against _____, or any security which Galvan Industries now has or hereafter acquires, whether or not such claim, right, or remedy arises in equity, under contract, by statute, under common law or otherwise.

Executed at _____ this _____ day of _____ 20_____

Witness: _____ Individually and as Grantor:

Social Security # _____ Date of Birth _____

Social Security # _____ Date of Birth _____