



Credit Agreement

Date

| | | | |
|--|------|---|-----|
| Name in Full (Correct Trade Name) | | | |
| Business Address – Street & Number | City | State | Zip |
| Residence Address – Street & Number | City | State | Zip |
| Type of Business | | | |
| Business Phone: | | Home/cell phone: | |
| Fax: | | Email Address: | |
| Account is for Business use <input type="checkbox"/> | | | |
| Account is for Personal use <input type="checkbox"/> | | | |
| Number of Trucks Owned and Operated in the Business | | Number of Other Vehicles Owned and Operated in the Business | |

Type of Entity

| | | |
|---------------------------|--------------------------|----------------------|
| Corporation | <input type="checkbox"/> | |
| Limited Liability Company | <input type="checkbox"/> | Resale#: |
| Limited Partnership | <input type="checkbox"/> | Federal Tax ID#: |
| Partnership | <input type="checkbox"/> | DUNS#: |
| Sole Proprietorship | <input type="checkbox"/> | Business Start Date: |

Ownership

| | | | |
|---------------------------|------|-------|--------|
| Name of Owner: | | | Phone: |
| Address – Street & Number | City | State | Zip |
| Name of Owner | | | Phone: |
| Address – Street & Number | City | State | Zip |

Bank References

| | | | |
|---------------------------|----------|--------------|-------|
| Name | Account# | Contact Name | Phone |
| Address – Street & Number | City | State | Zip |

Trade References

| | | | |
|---------------------------|------|-------|--------|
| Name: | | | Phone: |
| Address – Street & Number | City | State | Zip |
| Name: | | | Phone: |
| Address – Street & Number | City | State | Zip |
| Name: | | | Phone: |
| Address – Street & Number | City | State | Zip |





Landlord

| | | | |
|--|--|---|-----------|
| Name: | | Phone: | |
| Address – Street & Number | | City | State Zip |
| Lease or rent amount per month: | | | |
| Tax Exempt <input type="checkbox"/> Yes <input type="checkbox"/> No | | Number: Exempt Sales tax certificate must be in our office before sales tax exemption is given. | |
| <input type="checkbox"/> Purchase Orders will be furnished. <input type="checkbox"/> Purchase Orders will NOT be furnished. | | Authorized Representatives will supply us with proper documentation upon request. | |
| It is understood that one invoice will be provided for each purchase made, unless otherwise specifically requested. | | | |
| If you wish to receive sales tax exempt status, please fill out the attached state sales tax exemption document(s) and return with this application. | | | |
| The undersigned hereby authorizes the above named bank(s), to release such information as is necessary to establish credit with our company. Your trade references will be verified with Dun & Bradstreet. | | | |
| Monthly statements and all correspondence pertaining to the account should be addressed to (if different than above): | | | |
| Name | | Title | |
| Street and Number | | | |
| City | | State | Zip Code |

Personal Guarantee

The within guarantee is made for the benefit of, and to obtain credit on a continuing basis from O'Halloran International. The undersigned hereby guarantees the performance of all obligations of _____, including but not limited to payment of all present and future indebtedness to O'Halloran International, whether secured or unsecured and regardless of how the indebtedness is represented or incurred and regardless of prior notice, demand or pursuit of remedies against the party primarily liable. The undersigned consents to any extension or alteration of any obligation and guarantees such without prior notice. This guarantee shall continue in effect until the undersigned has notified O'Halloran International in writing via certified mail of its cancellation, but such cancellation shall not alter any obligation of the undersigned arising therein prior to receipt of such written notice.

The undersigned hereby authorizes O'Halloran International or its agent to investigate his/her credit and authorizes any bank, mortgage lender or landlord, credit reference or any other party to release information to O'Halloran International or its agent, and hold harmless for such disclosure. The undersigned grants a security interest in all goods sold, and agrees to pay reasonable attorney's fees and cost of collection and interest at the maximum legal rate in the event of any default under this obligation.

Print name _____
 Signature _____ Date _____

*The applicant understands that all charges are due and payable on receipt of invoice. If the invoice is unpaid 30 days following the date of invoice the applicant agrees to pay interest on the unpaid balance at a rate of 1.5% per month.

