

APPLICATION FOR CHARGE ACCOUNT
BOYD BROTHERS, INC.

P.O. Box 18 • Panama City, Florida 32402-0018

Name of Company _____
Or Individual _____ Date _____

Billing Address _____
Street Address P.O. Box City State Zip Code

Delivery Address _____ Receiving Hours _____

Purchasing Agent _____

Telephone Number _____ Type of Business _____

Principal Owner or Officers are: _____

Business is a Corporation Partnership Proprietorship Individual

If Individual, skip to block below. Contact Person regarding this Account _____

Corporate Officers
Owners Title Home Address City State Zip Code Home Telephone

Name of Bank _____
Street Address City State Zip Code

Account No. _____

Bank Contact _____ Title _____ Phone _____

Are you an officer in any other business? If so, name _____

How long have you been in this area? _____ Year Business Established _____

If Subsidiary, Name of Parent Company _____

Address of Parent Company _____
Street Address P.O. Box City State Zip Code

Are bills to be paid by Home Office? or Local Branch Paid by Invoice Statement

Are Purchase Orders Required? Yes No If more than one invoice copy is required, give quantity _____

Are your purchases subject to Florida State Sales Tax? Yes No If no, please provide Tax Number _____
(If not, you must furnish your Annual Sales Tax Exemption Certificate)

Federal ID# _____ Estimated Monthly Purchases \$ _____

TRADE REFERENCES: (Complete addresses and phone numbers are necessary so that we can process your application promptly.)
PLEASE INCLUDE ONE PRINTING REFERENCE.

1. Name _____ Phone and Fax Number _____
Address _____ Contact _____

2. Name _____ Phone and Fax Number _____
Address _____ Contact _____

3. Name _____ Phone and Fax Number _____
Address _____ Contact _____

4. Name _____ Phone and Fax Number _____
Address _____ Contact _____

TERMS: NET 30 days. Invoices are due and payable in full 30 days from date of invoice. Accounts not paid within 60 days from invoice date will be subject to suspension. Your signature on this application indicates your acceptance of our credit terms.

I, the undersigned, hereby agree that in the event of default in the payment of any amount due, and if this account is placed in the hands of an agency or attorney for collection or legal action, to pay an additional charge equal to the cost of collection including agency and attorney fees and court cost incurred and permitted by laws governing these transactions. Customer also agrees that Boyd Brothers, Inc. may conduct a credit investigation, including the preparation of a credit report and that it may contact the above named bank(s).

The Guarantors jointly and severally hereby unconditionally and absolutely guarantee the due and punctual payment of all indebtedness, obligations and liabilities to Boyd Brothers, Inc. now or hereafter incurred (herein call 'Obligations'). Such guaranty is an absolute, present and continuing guaranty of payment and not of collectibility and is in no way conditioned or contingent upon an attempt to collect from any client or customer or upon any other action, occurrence together with interest on any overdue Obligation at annual rate of 18%.

I agree that my indebtedness to Boyd Brothers, Inc. is not affected by my ability or inability to collect from my client.

Signature _____ Date _____

Title (Must be Owner or Officer)

IN WITNESS WHEREOF, this Guaranty has been duly executed by the Undersigned the date set forth below:

Witness: _____ Signature _____

Print Name _____

Address: _____

Date: _____

Witness: _____ Signature _____

Print Name _____

Address: _____

Date: _____

If you have any questions, please call Denise Newman, Credit Manager.

FOR OFFICE USE ONLY	
Disposition:	
Date _____, 20____	F
Approved Rejected	D
By _____	
Account Number _____	
Credit Limit \$ _____	