**HURON PAINT & SUPPLY 203 KANSAS AVE SE 605-554-0148**

**huronpaintsupply@gmail.com HURON SD, 57350 Locally Owned and Operated!**

**COMMERCIAL CREDIT APPLICATION DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TO OUR APPLICANT:**

**We request that you complete the application fully and sign in the proper place. You may email, mail, or drop off your application. Thanks**

**(APPLICANT INFORMATION)**

**Firms Full Legal Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Physical Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_ Fax. No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**P O Box \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Federal ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Person Responsible for Payment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Business Started \_\_\_\_\_\_\_\_\_\_\_\_ If Incorporated, in what State \_\_\_\_\_\_\_\_\_ Est. Monthly Purchases\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tax Exempt? □ Yes □ No *IF YES, CERTIFICATE MUST BE ATTACHED TO APPLICATION TO QUALIFY.*. No. of Employees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Type of Business: Corporation \_\_\_\_\_\_, Partnership \_\_\_\_\_\_, Proprietorship\_\_\_\_\_, LLC \_\_\_\_\_\_, Limited Partnership\_\_\_\_\_\_\_**

**Business Category: (Example: Painter, Builder, Cabinet Shop, Etc.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Place of Business: Do you \_\_\_\_\_Lease \_\_\_\_\_ Rent \_\_\_\_Own Do you work from \_\_\_\_\_\_\_Shop \_\_\_\_\_\_\_Home**

**Require any of the following (PLEASE CIRCLE) Purchase Order # on Invoice Job Site / Address**

 **Priceless Receipts for Employees Weekly Invoices Sent**

 **Authorized Purchasers (Provide List) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CREDIT REFERENCES: (If more space is needed, please provide separate sheet)**

**Name Account # Phone No. Fax No.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CREDIT REFERENCES**: (If more space is needed, please provide separate sheet)

Name Account # Phone No. Fax No.

**PRINCIPAL OWNER OR ALL PARTNERS**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Credit Terms**

The information as set forth above is furnished for the purpose of requesting Huron Paint & Supply to grant and extend me/us credit for the purchase of merchandise on your open account terms. The undersigned acknowledge that this account is for commercial purposes and not for personal, household, or family purposes.

The undersigned agree, jointly and severally, to pay any and all sums that may become payable under this account for merchandise sold to the applicant or to any person with apparent authority to utilize this account, unless notified to the contrary in writing by the applicant according to the credit terms of this Company: **Payment terms are Net 30th end of following month from date of purchase**. All past due balances are subject to interest of 1 1/2% per month (18% annual percentage rate). The undersigned agree(s), to pay collection fees and/or attorney’s fees of 33 1/3% of the outstanding balance of this account, plus all costs of collection, to include court cost and all expenses (except where prohibited by law) in the event collection becomes necessary. The undersigned further agree(s) that any controversy or claim arising out of or relating to these credit terms or breach thereof shall be brought in the appropriate court.

The applicant, guarantors and others from time to time obligated under this account hereby jointly and severally waive and renounce the benefit of homestead and all other exemptions rights as against this indebtedness or any renewal or extension hereof; and further waive demand, protest, notice of protest, presentment for payment, notice of dishonor and all defenses on the ground of extension of time for payment hereof (except where prohibited by law).

 This credit application shall remain in full force and effect until the Company shall have received written notice of: instructions to create no further transactions under the terms and conditions of this credit application, a change in business ownership, or changes of any type. A certified mail receipt for such notification shall be conclusive evidence of the said receipt of such notice. Facsimile or electronic copy of this credit application will have the same force and full effect of the original document.

 \*Note\* - The undersigned individual(s) who is/are either a principal, partner, or guarantor of the credit applicant (s), a sole proprietor of the credit applicant, is the sole member of a limited liability company who is the credit applicant, or is an officer or director of the credit applicant (s), recognizes that his or her individual credit history may be a factor in the evaluation of the application for credit by the credit applicant for credit with Huron Paint & Supply and hereby consents to and authorizes Huron Paint & Supply or its representative, obtaining and using a Consumer Credit Report on the undersigned from time-to-time as may be needed in the credit evaluation process.

**By: By:**

**Name Printed: Name Printed:**

**Title or Capacity: Title or Capacity:**

**Date: Date:**

**PERSONAL GUARANTEE**

**In consideration of the Company extending a line of credit to the Applicant, I/we agree jointly and severally, to** personally guarantee **prompt payment, upon demand by the Company, of any and all debts owed to the Company by the Applicant named in this credit application. I/we fully understand and agree to be legally bound by all Credit Terms shown above in this credit application.**

**Print Name Print Name**

**Signature Signature**

**Social Security No. Social Security No.**

**Date Date**

**CREDIT DEPT USE ONLY!!**

**Account No. Customer Class Code**

**Price Code: Outside Sales Rep Assigned**

**Store Manager Authorization Store #**

**Credit Limit Approved By Date**