



Parrish Tire Company

CREDIT APPLICATION

For Sale of Good and Services for Commercial and Business Use Only.

Applications cannot be considered unless they are signed by the owner, partner, or a corporate officer. Please enclose a copy of your current financial statements so we may grant the highest possible credit limit.

Date _____

LEGAL FIRM NAME _____ PHONE NO.: _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

PLEASE CHECK ONE: PROPRIETORSHIP _____ PARTNERSHIP _____ CORP. _____

STATE SALES TAX NO.: _____ FEDERAL EXCISE TAX NO. _____

DUN & BRADSTREET#: _____ ACCTS PAYABLE E-MAIL _____

TYPE OF BUSINESS _____

PRINCIPALS or OWNERS:

NAME _____ TITLE _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

NAME _____ TITLE _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

BANK NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

BANKER'S NAME _____ CHECKING ACCOUNT # _____

____ YEARS IN BUSINESS UNDER THIS OWNERSHIP AT THIS LOCATION _____

TRADE REFERENCES:	PLEASE PROVIDE AT LEAST THREE	
NAME	ADDRESS	PHONE NO.

1 _____

2 _____

3 _____

From the above information, please establish an account with Parrish Tire Co. pursuant to the terms and conditions set out herein.



Parrish Tire Company

LEGAL FIRM NAME _____

TERMS & CONDITIONS

This credit application is my written request to obtain credit from Parrish Tire Company and/or Parrish Tire Company of Akron and/or any affiliated corporation or business under assumed name owned in whole or in part by Parrish Tire Company or Parrish Tire Company of Akron, all collectively herein referred to as Parrish Tire Company.

The information above is correct to the best of my knowledge and I authorize Parrish Tire Company to complete a thorough credit investigation. If Parrish Tire Company deems it necessary, I hereby give Parrish Tire Company permission to obtain information from a participating Credit Bureau for the purposes of establishing credit, account review, credit line increases, collection or other legitimate purposes.

In the event of default in the payment of this account, I agree to pay interest at the rate of .75 % per month. Interest will be assessed upon balances thirty or more days' delinquent. I agree to pay all costs of collection including Attorney's Fees at the rate of 15% of the total balance due, including interest.

I agree that any legal action brought by Parrish Tire Company to collect any balance due by me under this agreement will be brought in Forsyth County, North Carolina and I hereby submit to the jurisdiction of said Court and all disputes, if any, and the terms of this Credit Application shall be governed by the laws of the State of North Carolina. Waiver of any provision of these terms by Parrish Tire Company, shall not be construed to be a waiver of the same or a different term in the future.

These terms shall not be altered except by a written modification signed by the applicant and Parrish Tire Company. The undersigned applicant warrants and represents that he/she is either an owner of the applicant or is a duly authorized office /agent of the applicant and has actual authority to enter into this agreement on behalf of the applicant and obligate such applicant to the terms set out herein.

Printed Name _____

Printed Name _____

Title _____

Title _____

Signature _____

Signature _____

PERSONAL GUARANTEE

In consideration of the extension of credit to the applicant pursuant to the terms of this account, which the undersigned consider(s) to be of value to the undersigned, each of the undersigned individual(s) personally guarantee(s) to pay the entire obligation of the applicant (including all accrued interest, attorney's fees and costs of collection) in the event the applicant fails to pay any of said obligation, immediately upon demand made by Parrish Tire Company on the undersigned individual(s). This guarantee is an absolute and unconditional, irrevocable guarantee of payment and performance and the undersigned agree to be jointly and severally liable with the applicant for any sums due hereunder.

Witness to Signature _____ Personally and Individually _____

Witness to Signature _____ Personally and
Individually _____

Parrish Tire Representative to Complete This Section

Account Location(s) _____

Salesman # _____ Signature _____

Sales Manager Signature: _____