

Account Application / Credit Application

The Scruggs Company

Mailing: P.O. Box 2065, Valdosta, GA 31604
Shipping: 4679 Old Hwy 41 North, Hahira GA 31632
Phone: 229-242-2388 / Fax: 229-242-7109



Company Legal Name: (i.e. applicant)

Trade Name / DBA: Fed ID #:

Address:

City: State: Zip:

Contact Name: Title:

Phone: Fax:

email:

Type of business: Credit amount requested: \$

Business Structure: [ ] sole proprietor [ ] corporation; state [ ] partnership [ ] joint venture
[ ] limited liability company (LLC) [ ] limited liability partnership (LLP)

Years in business: Years at current address:

Tax Exempt: (circle one) yes or no If "yes", Tax Exempt Number:
(Also attached Tax Exemption Certificate, form ST-5 for Georgia)

Type of products you plan to purchase at this time:

FINANCIAL INFORMATION

Name of Bank: Account #:

Address: Phone:

Contact name:

TRADE REFERENCES

1 Name:
Address:
Phone: Fax:

2 Name:
Address:
Phone: Fax:

3 Name:
Address:
Phone: Fax:

4 Name:
Address:
Phone: Fax:

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**The Scruggs Company**

I (we) agree as follows:

Payment Terms

Unless agreed in writing elsewhere, payment late if received after the 20th of the following month. All past due amounts are subject to a fee of 1.5% per month (18% ANNUAL PERCENTAGE RATE), or the maximum permitted by law, whichever is less.

Applicant agrees to reimburse seller all costs of collections, including reasonable attorney's fees.

Permission to Contact references

I (we) authorize THE SCRUGGS COMPANY to obtain further information concerning my (our) credit standing from any credit bureau, the references and accounts herein listed or any other person or source.

Termination

THE SCRUGGS COMPANY reserves the right to limit or terminate further purchases at any time without notice.

Enforceability

In the event any of the terms or conditions of sale outline herein become unenforceable or void, the validity of the remaining terms and conditions will not be impacted.

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Certification

The undersigned certifies that:

- I am authorized to execute this binding document on behalf of the applicant, and
- the applicant is solvent and capable of meeting its obligations hereunder, and
- all information provided to seller is true, accurate and complete.

Printed Name : \_\_\_\_\_

Signature : \_\_\_\_\_ date: \_\_\_\_\_

title: \_\_\_\_\_

***(please remember to initial the lower right hand corner of the 1st page)***

PERSONAL GUARANTEE

I/we the undersigned do hereby guarantee payment, as individuals, of any indebtedness incurred by the virtue of any credit extended in accordance with the above application:

Guarantor name: \_\_\_\_\_

Guarantor signature: \_\_\_\_\_ date: \_\_\_\_\_

Guarantor name: \_\_\_\_\_

Guarantor signature: \_\_\_\_\_ date: \_\_\_\_\_