

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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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.

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: _____