

TAHOE SUPPLY COMPANY

3315 Research Way, Carson City, NV 89706

Phone: 775-883-5588 Fax 775-883-1991

APPLICATION FOR CREDIT

Company Name _____

Billing Address _____

City _____ State _____ Zip Code _____

Shipping Address _____

City _____ State _____ Zip Code _____

Phone Number: _____ Fax Number: _____

Partnership _____ Corporation _____ Sole Proprietor _____ Other _____

FEIN or S.S. # _____ Years In Business _____

Accounts Payable Contact _____ Phone: _____

Trade References: NOTE: Application can not be processed without fax numbers for references.**

Company	Address	Phone #	Fax#
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Bank References:

Bank Name & Address:	Account #	Phone #
_____	_____	_____
_____	_____	_____

Customer Agreement: In consideration for credit being extended, I or we acknowledge and agree to the following; 1) Payment is jointly, severally, and unconditionally guaranteed within 30 days from date of delivery; 2) Any charges unpaid after the above thirty days are to be increased by 1.5% per month; 3) Any charges still outstanding after 90 days from date of delivery are subject to collection, and all collection or arbitration expenses, attorneys' fees and court costs will be borne by the purchaser; 4) Title to all work and product shall remain with the creditor until all invoices and additional charges have been paid in full; 5) All claims, requests for adjustment, or notification of errors must be made within thirty days, or charges are considered accepted; 6) This agreement shall apply to all current and future charges unless revocation is received by registered mail; 7) Credit privileges may be withdrawn at any time with invalidating the terms of this agreement.

AUTHORIZED SIGNATURE: _____ **DATE:** _____

PRINT NAME AND TITLE: _____