



2380 S. 6<sup>th</sup> Street  
 Klamath Falls, OR 97601  
 541-885-3535

1881 NE 7<sup>th</sup> Street  
 Grants Pass, OR 97526  
 541-471-4300

Approved: _____
Date: _____
Credit Limit: _____

### New Account Application

Company Name			First Name	Last Name
Street Address			Street Address	
Mailing Address			Mailing Address	
City ( )	State ( )	Zip ( )	City ( )	State ( ) Zip
Business Phone		Fax Number	Home Phone	
Contractor's License Number		State of Issue	Driver's License Number	State of Issue
Year Organized	Type of Business		Social Security Number	

**If Corporation, Fill in Officers – Partnership, fill in Partners – Sole Owner, fill in Owner**

Check One:	Partners – Vice President:
Sole Owner <input type="checkbox"/>	
Partnership <input type="checkbox"/>	Partners – Secretary/Treasurer:
List Partners	
Corporation <input type="checkbox"/>	Partners – President – Sole Owner:
List Officers	
Limited Liability Company <input type="checkbox"/>	Limited Liability Managing Member:
List Members	

Bank Name	Address	City	State	Zip
<input type="checkbox"/> Checking Acct. No.		<input type="checkbox"/> Checking Acct. No.		
<input type="checkbox"/> Savings		<input type="checkbox"/> Savings		
Are your receivables financed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Acct. No.		

Credit Established	1. Name	Phone:	Fax:
	2. Name	Phone:	Fax:
	3. Name	Phone:	Fax:
	4. Name	Phone:	Fax:

Credit Limit Requested: \$ \_\_\_\_\_

Have you ever been liened or sued for unpaid labor or material bills?  Yes  No  
 If Yes, Please Explain: \_\_\_\_\_

Have you ever filed for bankruptcy?  Yes  No If Yes, When? \_\_\_\_\_

**DIAMOND HOME HARDWARE & GARDEN LLC**

**TERMS OF CREDIT**

ALL INVOICES ARE DUE FOR PAYMENT BY THE 25<sup>TH</sup> DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE PURCHASE WAS MADE. IF PAYMENT IS NOT RECEIVED BY THE 26<sup>TH</sup> DAY OF THE MONTH, THE ACCOUNT WILL BE PAST DUE.

**PAYMENTS ON ACCOUNTS MUST BE MADE WITH CASH, CHECK, CASHIER'S CHECK OR MONEY ORDER. UNFORTUNATELY WE ARE UNABLE TO ACCEPT MAJOR CREDIT CARDS AS A FORM OF PAYMENT ON ACCOUNTS.**

A SERVICE CHARGE OF 18% PER ANNUM OR FRACTION THEREOF OR THE HIGHEST RATE ALLOWABLE BY LAW WILL BE CHARGED ON ALL PAST DUE SUMS. IN NO EVENT WILL THE SERVICE CHARGE HEREUNDER EXCEED THE MAXIMUM INTEREST RATE ALLOWABLE BY APPLICABLE LAW.

THE MAXIMUM SERVICE CHARGE ALLOWABLE BY LAW WILL BE PAID FOR EACH CHECK RETURNED UNPAID.

THIS APPLICATION IS TO OBTAIN CREDIT FROM DIAMOND HOME HARDWARE & GARDEN, LLC WHETHER PURCHASES ARE TO BE MADE NOW OR HEREINAFTER. IN THE EVENT ANY ACCOUNT IS NOT PAID WHEN DUE, OR IN THE EVENT ANY TERM HAS NOT BEEN MET AS AGREED, ANY PART OR ALL SUMS OWING TO DIAMOND HOME HARDWARE & GARDEN, LLC WHETHER OR NOT THEN DUE, SHALL THEREUPON BECOME DUE AND PAYABLE IN FULL BY THE SOLE OPTION OF DIAMOND HOME HARDWARE & GARDEN. THE UNDERSIGNED AGREES TO PAY ALL REASONABLE COSTS, EXPENSES AND ATTORNEY'S FEES, WHETHER SUIT IS FILED OR NOT, INCURRED IN THE ENFORCEMENT OF ANY OBLIGATION OF THE UNDERSIGNED, OR INCURRED IN THE COLLECTION OF ANY SUM DUE EXTENDED IN RELIANCE HEREON, OR THE ENFORCEMENT OF THE CONTINUING GUARANTEE A PART HEREOF.

APPLICANT ACKNOWLEDGES THAT APPLICANT HAS READ AND ACCEPTS THE TERMS AND CONDITIONS OF CREDIT AS SET FORTH ON THE APPLICATION AND AUTHORIZED DIAMOND HOME HARDWARE & GARDEN, LLC TO CHECK THE CREDIT AND EMPLOYMENT HISTORY OF APPLICANT AND ITS OFFICERS, MEMBERS, MANAGERS, AND GUARANTORS. APPLICANT REPRESENTS THAT ALL INFORMATION PROVIDED IS TRUE AND COMPLETE.

\*\*PRINT : \_\_\_\_\_

\*\* SPOUSE OR PARTNERS

\*\*PRINT: \_\_\_\_\_

\*\*SIGNATURE: \_\_\_\_\_

\*\*SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_ \*\* DATE: \_\_\_\_\_

\*\*TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

**CONTINUING GUARANTEE**

For the purposes of inducing extension of credit or of inducing temporary forbearance from collection of accounts for monies due at the time hereof from the person or firm applying for credit, listed on the reverse side hereof, the undersigned hereby absolutely and unconditionally guarantees, on a continuing basis, the performance of the person or firm on the reverse side hereof applying for credit, and to whom credit is extended, including but not limited to the due and prompt payment of all present and future indebtedness, whether secured or unsecured and regardless of how the indebtedness is represented or incurred. The undersigned consents to any extension or alteration of any obligation and guarantees such without prior notice, demand or pursuit of remedies against the party primarily liable. This guarantee shall continue in effect until the undersigned has notified the creditor in writing of its cancellation, but such cancellation shall not alter any obligation of the undersigned arising hereunder prior to receipt of such written notice. The undersigned hereby further agrees to indemnify and save creditor harmless from any loss, damage and expense caused by or arising out of any default on the part of such person or firm in making payment of any part or all of such sums and in the event of such default agrees, upon demand, to pay creditor the amount of any such loss, damage and expense. The undersigned further agrees to pay all reasonable costs, expenses, and attorney's fees incurred in the enforcement of this continuing guarantee, or in the enforcement of any obligation as a result of the extension of credit or forbearance, including but not limited to the collection of any past due indebtedness whether or not suit is filed.

\*\*Dated: \_\_\_\_\_

\*\*PRINT : \_\_\_\_\_

\*\* Guarantor Signature: \_\_\_\_\_

\*\* Dated: \_\_\_\_\_

\*\*PRINT : \_\_\_\_\_

\*\*Spouse or Partner  
Guarantor Signature: \_\_\_\_\_

“Receipt of a facsimile transmission of the credit application executed by the undersigned is deemed to be the same as the delivery of the original credit application, and a copy of the executed credit application shall be considered for all purposes as an original and may be relied upon by the creditor as such.”

\*\*Signature: \_\_\_\_\_

\*\* Date: \_\_\_\_\_



**DIAMOND HOME HARDWARE & GARDEN LLC**

Firm Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Name of Accounts Payable Contact: \_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_

**METHOD OF RECEIVING MONTHLY STATEMENTS:**

Please review and check your preferred method in receiving your monthly statement.

Email                                      Email Address: \_\_\_\_\_

Facsimile                                      Fax Number: (\_\_\_\_\_) \_\_\_\_\_

**METHOD OF AUTHORIZING PURCHASES:**

Please review and check your preferred method(s) for authorizing purchases on your account.

- Open Purchase Order (Anyone Can Use This Account)
- Purchase Order Required On All Purchases
- Authorized Signature File. If yes, complete section below.

**NAMES OF AUTHORIZED PURCHASERS:** (Attach separate list, if necessary.)

<b>Printed Name</b> <i>(Please Print)</i>	<b>Signature</b>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

**Return To: 2380 South 6<sup>th</sup> St., Klamath Falls, OR 97601 –or– Fax: (541) 885-5626 –or– Email: accountsreceivable@diamonddhi.com  
Attn: Credit Department**