



NEW ACCOUNT APPLICATION

Company Name: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax Number: _____

Contractor's License Number: _____ State of Issue: _____

Year Organized: _____ Type of Business: _____

First Name: _____ Last Name _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Social Security Number: _____

Driver's License Number: _____ State of Issue: _____

COMPANY STRUCTURE

Check one: Corporation (*list officers below*) Limited Liability Company (*list members below*)

Partnership (*list partners below*) Sole Proprietorship (*list owner below*)

Owner/President/Limited Liability Managing Member _____

Vice President/Member: _____

Secretary/Member: _____

Treasurer/Member: _____

OFFICE USE ONLY

Date Received _____ Approved Date: _____

Entered: _____ Credit Limit: _____

Account Number: _____

BANK REFERENCES

Bank Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Account Type: (Check one) Checking Savings Account Number: _____

Account Type: (Check one) Checking Savings Account Number: _____

Are your receivables financed? Yes No Account Number: _____

CREDIT REFERENCES

Name: _____ Phone: _____ Fax: _____

Name: _____ Phone: _____ Fax: _____

Name: _____ Phone: _____ Fax: _____

Name: _____ Phone: _____ Fax: _____

Credit cards, loans and banks will not be accepted as references (Examples of accepted references: Grovers, Pape or Les Schwab)
Please contact accounts receivable if you are unsure 541.880.7949

Credit Limit Requested \$ _____

Have you been sued or had liens filed against you for unpaid labor or material bills? Yes No

If yes, please explain: _____

Have you filed for bankruptcy? Yes No If yes, when? _____

Diamond Home Hardware & Garden, LLC dba Diamond Home Improvement

TERMS OF CREDIT

All invoices are due for payment by the 25th day of the month following the month in which the purchase was made. If payment is not received by the 26th day of the month, the account will be past due. **Applicant must notify Diamond Home Hardware & Garden, LLC of any billing errors or fraudulent charges within sixty (60) days of receipt of an invoice. Any such notice must be sent via mail to Diamond Home Hardware & Garden, LLC via first class mail.**

Payments on accounts must be made with cash, check, cashier's check or money order. If a major credit card is used there will be a 3% handling fee added to your account.

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, LLC. 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: _____

Print: _____
Spouse or Partner

Signature: _____

Signature: _____
Spouse or Partner

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.

Print: _____
Guarantor

Print: _____
Spouse or Partner Guarantor

Signature: _____
Guarantor

Signature: _____
Spouse or Partner Guarantor

Title: _____ Date: _____

Title: _____ Date: _____



Company Name: _____ Phone Number _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

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 Facsimile 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 on file. If yes, complete section below.

Names of Authorized Purchasers (Attach separate list, if necessary.)

| | Printed Name | Signature |
|----|----------------------------|------------------|
| 1. | _____ <i>Print Name</i> | _____ |
| 2. | _____ <i>Print Name</i> | _____ |
| 3. | _____ <i>Print Name</i> | _____ |
| 4. | _____ <i>Print Name</i> | _____ |
| 5. | _____ <i>Print Name</i> | _____ |
| 6. | _____ <i>Print Name</i> | _____ |

Receipt of a facsimile 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:** _____