

# Lloyd Enterprises, Inc.

P.O. Box 3889, Federal Way, WA 98063-3889  
Phone: 253-874-6692 / 253-927-0416, Fax: 253-838-0103

<b>For Office Use Only</b>
NACM Called:
Approved:
Account No.:
Declined:
Credit Limit:

## CREDIT APPLICATION AND AGREEMENT (Business Only - Strictly Confidential)

**Date:** \_\_\_\_\_ **Credit Limit Requested:** \_\_\_\_\_

**Business Name:** \_\_\_\_\_ **Type of Business:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City, State, Zip Code:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_ **City, State, Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_ **Years in Business:** \_\_\_\_\_

### Form of Organization (Check One):

Corporation     Partnership     Sole Proprietor     Other

State Incorporated \_\_\_\_\_ Attach photocopy of assumed business name or current corporate license showing where and when filed.

### State Tax: (Check One)

Taxable     Non-Taxable

**Federal Tax ID Number:** \_\_\_\_\_

**UBI/Resale Tax Number:** \_\_\_\_\_  
(Exemption Certificate Required)

**Contractors License No.** (attach copy): \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Insurance Carrier or Agent** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

**Carrier Address:** \_\_\_\_\_

**Bonding Company Name and Location** (if applicable and not same as above): \_\_\_\_\_

### Bank References:

Bank Name	Branch	Name of Contact	Phone No.	Type Acct.	Account No.
1.					
2.					

### Trade References:

Name	Address	Phone Number	Fax Number
1.			
2.			
3.			
4.			

### Information on Principals of Business:

Name	Address	Title	Social Security No.
1.			
2.			
3.			

**Billing Data:**

Purchase Orders Required?  Yes  No Authorized Purchasers: \_\_\_\_\_  
Statements Required?  Yes  No \_\_\_\_\_

**Agreement**

In consideration of extending credit and selling goods to the Buyer executing this Application and Agreement, Buyer agrees to the following terms and conditions with respect to all purchases by Buyer made hereafter.

1. Payment terms are Net 10th prox. (invoices are due in full on the 10th of the month following date of invoice).
2. A service charge of 1-1/2% per month (18% annual percentage rate) will be charged on all past due balances.
3. In the event Buyer's account is referred to an attorney for collection, Buyer promises and agrees to pay Seller's reasonable attorney's fees and collection costs. The venue of any suit brought to collect this account will be had in King County, governed by the laws of the State of Washington.
4. Buyer represents and warrants to Seller that the above information is true and correct and acknowledges that Seller is extending credit to Buyer based on said representations.

**Signature(s)**

Lloyd Enterprises, Inc. is hereby authorized to investigate the personal and business credit record of the undersigned applicant and to report to proper persons and bureaus the discharge of obligations incurred under any credit advanced by Lloyd Enterprises, Inc. Applicant agrees that any credit will be advanced only on the basis of an applicable commercial form of Lloyd Enterprises, Inc. and that applicant will promptly pay and discharge all obligations, including without limitation any applicable service or late charges owed to Lloyd Enterprises, Inc. under any such credit advances.

If Corporation or Partnership:

If Proprietorship:

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Title:

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

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

**Personal Guarantee**

The undersigned, (print name) \_\_\_\_\_, of the applicant corporation/company hereby agrees to the above terms and conditions and assumes personal responsibility for payment of said corporation's/ company's account. It is understood that credit would not be extended to said corporation/company without this assumption of liability.

\_\_\_\_\_, an individual  
Signature