

PO Box 713

Yankton, SD 57078-0713 | Fax: 1-772-287-0431 Fax: 1-605-665-0501 www.SHURCO.com

Shur-Co® Donovan Corporate Headquarters 3353 SE Gran Park Way 2309 Shur-Lok St. Stuart, FL 34997-8837 Ph: 1-772-286-3350 Ph: 1-605-665-6000 www.DONOVAN-ENT.com

G003FM-0113

## CREDIT APPLICATION

	Salesman
ALL SECTIONS MUST BE COMPLETED.	
Date	Accounts Payable Contact
Name of Firm	Phone #
Billing Address	Fax #
Shipping Address	
City State	Zip Fed ID #
Email Address	How did you hear about us?
	Number of Employees
Description of Business	
1. Sole Proprietorship 2. General Partner	ship 3. Corporation 4. Personal Guarantor
NOTE: If #1 or #2 is checked, or if a smal	business, please fill in the following information:
Principal Name Home Street Address	City/State/Zip Social Security # Date of Birth
1	
2	
TAX STATUS. Taxable Resale (	attach resale tax certificate)
Estimated Annual Sales \$ Rated by D & B?	Y or N DUNS #
TRADE REFERENCES. * Will not process application without	reference fax numbers.
Business Name City/State/Zi	p Phone # Fax # (Required)*
1	
2	
3	
4	
BANK REFERENCES.	
Name	Address
	Account #
Contact Nama	

## TERMS AND CONDITIONS. MODIFICATION OF THE FOREGOING CONDITIONS WILL NOT BE ACCEPTED.

This is your agreement with Shur-Co\*, LLC, in connection with approval of your credit application. The agreement covers payment for goods and services that we may offer you from time to time.

ORDERS All orders are subject to written acceptance by Shur-Co. Prices, product listings, line drawings, catalogs, sizes,

weights and manufacturing details are subject to change without notice.

CREDIT Shipments will be made on a cash basis until a signed credit application is on file and credit has been established.

TERMS Once credit has been established, you will receive a letter stating the following terms with your account number and credit limit.

Repayment: You agree to pay in U.S. dollars all amounts owed us plus any finance changes and any other charges and fees according to the terms of this agreement.

Billing: We will send you an invoice for goods and services received and rendered immediately following the shipment of these articles. A discount of 1% is allowed if paid within 10 days of the INVOICE DATE, otherwise, the invoice becomes due 30 days after the invoide date. Invoices not paid within 30 days may result in your account being placed on credit hold status. A 1½% per month service charge will be added after 30 days. Accounts 90 days past due must file a new credit application before the account is reinstated.

Monthly Statement: If you have a balance, we will send you a monthly statement. You must make payments to us at the following address: PO Box 713, Yankton, SD 57078-0713.

Check Processing Fees: If you pay with a check and it is returned to us by your bank for any reason, we may charge you a fee of up to \$30.00 per return to cover our processing cost.

<u>Default/Collection Cost</u>: You will be in default if you do not pay your total due on time or if you file bankruptcy. Any disputes arising out of this Agreement that cannot be resolved by the parties will be resolved in state court located in Yankton, South Dakota. If we have to refer collections of your account to a lawyer, you will pay the lawyer's fee of up to 20% of the total amount (except where prohibited by state law), plus court cost or whatever other fee is permitted by law and awarded by the court.

<u>Irregular Payments</u>: We may accept late payment or partial payments, whether or not marked payment in full, without losing any of our rights under this Agreement.

<u>Limitation/Amendment:</u> We may limit your credit, cancel your account or (by giving you notice) change this Agreement at any time, including finance charges and annual percentage rate.

<u>Deposits:</u> Special order items may be subject to a 50% deposit. Such items will not be accepted for return except in cases of obvious quality deficiency.

RETURNS

All sales are final. All returns for warranty must be preceded by a written authorization and a return authorization number from Shur-Co\*. A copy of the written authorization must accompany the merchandise upon return. This is to insure proper credit. Upon confirmation of deficiencies by inspection, the merchandise will be corrected and returned, exchanged or purchase price credited. A 15% restocking fee may be assessed for items returned. Any deviations to the above-mentioned returns must be approved in writing.

## AUTHORIZATION TO CHECK CORPORATE CREDIT HISTORY.

The information provided by the applicant(s) is for the purpose of obtaining credit and is warranted to be true. Applicant(s) agree to the Terms and Conditions of the sale contained and shall govern all purchases made from Shur-Co\*, LLC. Applicant(s) authorize the business to whom this application is made to investigate the trade and bank references listed relating to the company's credit and financial responsibility.

Name (please print)	Signature	Title	Date

AUTHORIZATION TO CHECK INDIVIDUAL CREDIT HISTORY. Must be signed by a sole proprietor or general partner.

The undersigned individual, who is either a principal of a sole proprietorship of said business, recognizes that his/her individual credit history may be a factor in the evaluation of credit, hereby consents to and authorizes the use of a consumer credit report by the above-named business in the credit evaluation process. Applicant(s) agree to the Terms and Conditions of sale contained on this form and shall govern all purchases to Shur-Co\*, LLC.

Name (please print)	Signature	Title	Date