

D A V I D E D W A R D

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Credit Application

Company Name _____
Street Address _____ City _____ St _____ Zip _____
Business Telephone # _____ A/P Phone # _____ Cell Phone # _____
Fed Tax ID # _____ Sales Tax # _____ D&B # _____
In Business Since _____ At Above Address Since _____

Business Structure: Corporation Partnership Sole Proprietor Government University Other _____

Owners, Partners, or Corporate Officers (if applicable).

Name	Title	Address	City	State	Zip
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Assets, liquid assets, fixed assets, any and all inventories:

Description, estimated value, location, ownership of assets

Bank Reference:

Bank _____ Branch _____ Acct # _____
Address _____
Fax _____ Phone _____ Contact _____

Trade References:

Name _____ Address _____
Fax _____ Phone _____ Account Number _____
Name _____ Address _____
Fax _____ Phone _____ Account Number _____
Name _____ Address _____
Fax _____ Phone _____ Account Number _____

Has this company or any of its principals ever filed for bankruptcy protection? yes no

If yes, please explain (use a separate sheet if necessary)

Terms and Conditions:

1. I will notify The David Edward Company of any changes of ownership of our company.
2. If granted credit our company agrees to pay all invoices within twenty (20) days of invoice.
3. It is agreed that our company will pay a 1 ½ % monthly interest charge for all past due invoices.
4. It is agreed that our account will become C.B.D. if we fail to pay invoices within the above stated terms
5. If our company defaults on payment of any outstanding valid invoices, we agree to pay all reasonable collection, attorney fees and court costs.
6. The undersigned hereby agrees that any disputes arising out of this agreement or goods and merchandise ordered or delivered pursuant hereto will be governed and settled under applicable principles of Maryland law, under the jurisdiction of Maryland courts.
7. Customer hereby agrees that David Edward shall reserve the right to file all required documents to secure its interest in goods under the provisions of Article 9 of the Uniform Commercial Code
8. Should account be paid beyond thirty (30) days, account is in default and in breach of conduct. Terms will be revoked for six (6) months, and all finance charges are required to be paid before reinstatement.

I make the foregoing application for credit for the purpose of obtaining merchandise on an open account basis and I authorize The David Edward Company to make any inquiry regarding credit information contained in this application.

By signing this application, I acknowledge that I have read and understand the terms of sale, and agree to abide by them:

Printed Name (Owner/Officer) _____ Signature _____

Title _____ Date _____

PERSONAL GUARANTEE

In consideration for David Edward extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its' agents, the undersigned individual hereby personally guarantees, unconditionally and irrevocably, the prompt payment of all sums now or hereafter owed to David Edward by the business identified below whether said sums are due under open account, contract or otherwise.

This guarantee shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested by David Edward. Said notice shall specify the date on which this guarantee is to be terminated. Said date is not to be less than ten days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Name (Individual guaranteeing payment, no title) _____ Date _____

Home Phone _____ Social Security No. ____ - ____ - _____

Home Address _____ City _____ State ____ Zip Code _____

Signature of person guaranteeing payment

Name of business whose account is guaranteed