



Dealer / Business Credit Application for Net 30 Terms

Name/Address

Last:	First:	Middle Initial:	Title
Name of Business:			Fed. Tax I.D. Number
Address:			Phone:
City:	State:	ZIP:	Fax:

Company Information

Type of Business:	In Business Since:
Legal Form Under Which Business Operates: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>	
If Division/ DBA/Subsidiary, Name of Parent Company:	In Business Since:
Name of Company Principal Responsible for Business Transactions:	Title:
Address:	City: State: ZIP: Phone:
E-Mail for Store or Contact:	
E-Mail for Accounts Payable:	

Bank References

Institution Name:	Institution Name:	Institution Name:
Checking Account #:	Savings Account #:	Home Equity Loan: Loan Balance:
Address:	Address:	Address:
Phone:	Phone:	Phone:

Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Print Name: _____ Title: _____

Signature *Date*

AGREEMENT

The undersigned represents that he or she is an officer or agent of applicant and is duly authorized to act on its behalf. If extended credit pursuant to this Credit Agreement, the applicant hereby agrees to the following terms: Payment is due in full 30 days from the date of invoice. In the event that account is not paid in full by the due date, applicant will inform Heart and Soul Fashion of the reason for nonpayment and will pay a late payment charge of 1.5% per month (18% annual) computed on the unpaid balance. The applicant agrees to pay any and all cost, collection fee's, and reasonable attorney's fees incurred in the connection with collection of any past due balances on this account. Heart and Soul Fashion is hereby authorized to investigate the references listed above concerning applicant's credit history and financial responsibility. This Credit Application and Agreement supersedes any prior agreement between the parties and may not only be modified in writing.

Authorized Signature:	Date:
Printed Name & Title:	

Personal Guarantee: (Any Company less than 5 years Established Must Fill In and Sign)

THE UNDERSIGNED, FOR CONSIDERATION DO HEREBY INDIVIDUALLY AND PERSONALLY GUARANTEE THE FULL AND PROMPT PAYMENT OF ALL INDEBTEDNESS HERETOFORE OR HEREAFTER INCURRED BY THE ABOVE BUSINESS. THIS GUARANTEE SHALL NOT BE AFFECTED BY THE AMOUNT OF CREDIT EXTENDED OR ANY CHANGE IN THE FORM OF SAID INDEBTEDNESS. NOTICE OF THE ACCEPTANCE OF THIS GUARANTEE, EXTENSION OF CREDIT, MODIFICATION IN TERMS OF PAYMENT, AND ANY RIGHT OR DEMAND TO PROCEED AGAINST THE PRINCIPAL DEBTOR IS HEREBY WAIVED. THIS GUARANTEE MAY ONLY BE REVOKED BY WRITTEN NOTICE WHICH SHALL BE SENT TO THE CREDITOR'S CREDIT OFFICE BY CERTIFIED MAIL. ANY REVOCATION DOES NOT REVOKE THE OBLIGATION OF THE GUARANTORS TO PROVIDE PAYMENT FOR INDEBTEDNESS INCURRED PRIOR TO THE REVOCATION. I AUTHORIZE THE SELLER AND THEIR ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT AND TO CONTACT MY REFERENCES AS NECESSARY.

GUARANTOR'S NAME: _____ SIGNATURE: _____

HOME ADDRESS: _____ CITY/STATE/ZIP: _____

DATE: _____ TAX I.D. OR S.S. NO: _____