



CONFIDENTIAL DEALER CREDIT APPLICATION

INSTRUCTIONS FOR COMPLETING CREDIT APPLICATION

1. All areas of this credit application along with guarantee must be filled out completely. If not complete the application will be returned to the Representative handling your account, and will likely delay our ability to serve you.
2. Please fill in the "Requested Credit Limit" you feel your company needs. If your "Requested Credit Limit" exceeds \$20,000.00 per month, include financial statements with this application.
3. Please allow up to three weeks upon receipt by Murfco Inc. for your credit application to be processed.
4. With customers that have been in business for less than one (1) year, we request that a cashier's check for the amount of the opening order, as well as the opening order, be attached to the application.
5. When filling out the "Industry Trade References" portion of this application, please be sure the information you provide is current and complete with an account number and a contact person in order to expedite processing.

CREDIT APPLICATION

This credit application seeks credit from Murfco Inc. Inc. and applies to all purchases from Murfco Inc. under any brand or division. (All areas must be fully completed. Incomplete applications will be returned for completion)

Company

Name _____

Trade Name (D.B.A.) _____

Other (Legal) Names (if any) _____

Check the line by the name you wish to appear on your invoices and statements.

Business Address

City _____ State _____ Zip _____



Business No. (____) _____ Fax No. (____) _____

E-mail _____

Type of Business Proprietorship Partnership Corporation

If Entity is a Corporation State of Incorporation _____

Date incorporated _____

Date this business started _____ Number of Current Employees _____

Number of Locations _____

If more than one location, please attach a list.

Last Three Years Sales \$ _____ \$ _____ \$ _____

Federal Taxpayer Identification Number _____

Principle Owner, Proprietor, Partners, or Officers (if a Corporation)

1. Name _____ Title _____

S.S. No. _____

Home Address _____

Telephone No. (____) _____ E-mail _____

Date of Birth ____/____/____

Driver's License # _____ State _____



2. Name _____ Title _____

S.S. No. _____

Home Address _____

Telephone No. () _____ E-mail _____

Date of Birth ____/____/____

Driver's License # _____ State _____

Have any of the companies and/or individuals listed above ever been involved with a filing of Bankruptcy?

Yes No. If "Yes", please state date, case numbers, those involved and result

Accounts Payable Manager _____

Phone _____ Fax _____ Email _____

Primary Buyer _____ Phone _____ Fax _____

E-mail _____

Have you done business with Murfco Inc.? Yes No

If so, when and under what name(s) _____



BANK REFERENCES

Bank Name _____

Telephone No. (____) _____ Fax No. (____) _____

Branch Address _____

City _____

State _____ Zip _____

Contact Name _____

Account No. _____

Bank Name _____

Telephone No. (____) _____ Fax No. (____) _____

Branch Address _____

City _____

State _____ Zip _____

Contact Name _____

Account No. _____



INDUSTRY TRADE REFERENCES

Reference Number 1

Name _____ Contact _____

Telephone No. (____) _____ Fax No. (____) _____

Address _____

City _____ State ____ Zip _____

Account No. _____

Reference Number 2

Name _____ Contact _____

Telephone No. (____) _____ Fax No. (____) _____

Address _____

City _____ State ____ Zip _____

Account No. _____

Reference Number 3

Name _____ Contact _____

Telephone No. (____) _____ Fax No. (____) _____

Address _____

City _____ State ____ Zip _____

Account No. _____



INDUSTRY TRADE REFERENCES

Reference Number 4

Name _____ Contact _____

Telephone No. (____) _____ Fax No. (____) _____

Address _____

City _____ State ____ Zip _____

Account No. _____

Reference Number 5

Name _____ Contact _____

Telephone No. (____) _____ Fax No. (____) _____

Address _____

City _____ State ____ Zip _____

Account No. _____

Reference Number 6

Name _____ Contact _____

Telephone No. (____) _____ Fax No. (____) _____

Address _____

City _____ State ____ Zip _____

Account No. _____



Credit Card Form

Date: / /

Customer Name: _____

Customer Account: _____

Credit Card Number: _____

Expiration Date: _____

CVV Number: _____

Name on Card: _____

Credit Card Billing Address:

Telephone Number: (____) _____ Fax Number: (____) _____

Cardholder Signature: _____



Requested Credit Limit with Murfco Inc. \$ _____

Flooring Companies Used (if any) _____

I hereby warrant personally and on behalf of the applicant that the information contained in this credit application, all financial information supplied or to be supplied to Murfco Inc. and/or its divisions, at any time is true and correct, and is furnished for the purpose of obtaining credit from Murfco Inc. On behalf of myself, the applicant, and its principals, and in connection with this application and an anticipated business relationship with Murfco Inc., I hereby authorize Murfco Inc. to conduct personal background checks on the applicant and all principals of the applicant and to review the credit history and credit reports of the applicant and its principals. This authorization applies beginning at the time of the initial application and continues at any time while the applicant has a continuing business relationship with Murfco Inc.;

- Authorize Murfco Inc. to conduct personal background checks on the applicant and all principals of the applicant and to re-view the credit history and credit reports of the applicant and its principals. This authorization applies beginning at the time of the initial application and continues at any time while the applicant has a continuing business relationship with Murfco Inc.
- Authorize Murfco Inc., in connection with any such review, to contact any person it believes may have information relevant to its credit decision, including but not limited to the references listed in this application, other businesses who may have done business with the applicant or its principals, financial institutions and credit reporting agencies (including but not limited to Dunn & Bradstreet);
- Authorize the references, businesses, financial institutions, and credit reporting agencies to release to Murfco Inc. any information Murfco Inc. requests and release them from any claim the applicant or its principals might have against them as a result of the release of information; and consent to Murfco Inc.'s use of the information in connection with its credit decisions. I acknowledge that the business relationship between the parties shall be governed by the terms and conditions contained in Murfco Inc.'s applicable authorized dealer or distributor agreement(s), invoices, cost schedules, and other commercial forms and agreements.

Security Agreement – To insure payment of all obligations, dealer grants to Murfco Inc. a purchase money security interest in all products and its proceeds purchased from Murfco Inc.

Signature _____

Title _____ Date _____



GUARANTEE

(All Applicants Must Complete This Form)

In consideration of Murfco Inc. extending credit to the foregoing applicant, the undersigned jointly and severally (“Guarantor”) hereby unconditionally guarantee payment when due to Murfco Inc. of all indebtedness of said applicant to Murfco Inc. This is a continuing guarantee which shall remain in full force and effect until terminated by written notice sent by U.S. Registered Mail from Guarantor to Murfco Inc., provided, however, that such termination shall not affect nor impair Guarantor’s liability for any indebtedness created before actual receipt of such notice by Murfco Inc. The liability of Guarantor hereunder is primary and direct and may be enforced without resort by Murfco Inc. to any other right, remedy or security. Guarantor hereby agrees to pay Murfco Inc., in connection with the collection of any amounts due hereunder. The liability of Guarantor shall not be affected by any indulgence, compromise or settlement made by Murfco Inc. with any other party. In connection with this guarantee, I authorize Murfco Inc. to conduct personal background checks on me and to review my personal credit history and credit reports. This authorization is effective at the time of the applicant’s initial credit decision and continues during any time while this guarantee remains in effect. I authorize Murfco Inc. to request information from any person it believes may have information relevant to my credit history, including but not limited to other businesses who have engaged in business with me, financial institutions and credit reporting agencies. I authorize persons from whom Murfco Inc. requests information to provide the information to Murfco Inc., release them from any claim I might make against them for the release of information to Murfco Inc., and consent to Murfco Inc.’s use of the information in connection with its credit decisions.

Name _____

Signature _____

Title _____ Date _____

RESALE TAX EXEMPTION CERTIFICATE (All Applicants Must Complete This Form)

Dealer Name (as listed on “Sales Certificate”):

I hereby certify that I hold a “VALID” seller’s Permit No. _____ issued pursuant to the sales and use tax laws of the State of _____. That I am engaged in the business of selling “tangible personal property” which I shall purchase from “MURFCO INC.

CORPORATION” and will be resold by me in the form of tangible personal property. Provided, however, that in the event any of the said property