



Customer Account Information
 P.O. Box 1637 – N22 W23685 Ridgeview Pkwy West
 Waukesha, WI 53187-1637
 262-523-6200 ° 800-392-3278 ° 262-523-3422

Sales Rep # _____

Customer # _____

BUSINESS INFORMATION	Legal Name _____		Business Phone _____		
	DBA Name _____		Business Fax _____		
	Business Address _____		email address _____		
	City _____	State _____	Zip _____	County _____	
	Bill to address if different:				
Business Ownership (check one)					
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Corporation					
_____		_____	_____	_____	
Date you took ownership Federal Tax ID# State of Incorporation					
OWNER'S INFORMATION	Owners (if applicant is a sole proprietor or partnership) or officers (if corporation): (The information provided below may be used to obtain a consumer credit report and your credit worthiness may be considered when making a decision to grant credit to Buyer.)				
	Name _____	Title _____	SSN# _____	Home Phone _____	
	Home Address _____		City _____	State _____	Zip _____
	Name _____	Title _____	SSN# _____	Home Phone _____	
	Home Address _____		City _____	State _____	Zip _____
Do any of the principal owners do business under any other names? Please list:					
PAYMENT	If you prefer to pay by Visa/MasterCard, please fill in:				
	_____ (Type)	_____ (Account #)	_____ (Security Code)	_____ (Exp. Date)	
	Do you wish to receive monthly statements? <input type="checkbox"/> YES <input type="checkbox"/> NO Are Purchase Orders required for payment? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Name of person to contact regarding payments: _____					
Phone _____					
BANK	Name _____		Address (Street, City, State, Zip) _____		
	Phone _____		_____		
Acct # _____		Name of Bank Officer _____		<input type="checkbox"/> Loan <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
TRADE REFERENCES	Name _____		Address _____		
	1 _____		Phone _____		
	2 _____		Fax _____		
3. _____		Contact/Acct No. _____			

CORPORATE

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attitude makes the positive difference.



ILLINOIS AND MICHIGAN

7370 N. Lincoln Avenue
Lincolnwood, IL 60712-1705
847-675-0505 • 847-675-0507 Fax
888-263-5937

**TERMS OF THE AGREEMENT and
GRANT OF SECURITY INTEREST AND POWER OF ATTORNEY**

The undersigned is **authorized** to make this application and certifies that he/she has read and agrees to all terms and conditions stated herein. Buyer hereby:

1. **Authorizes banks and trade references listed above to release any information requested by us for purposes of assessing the credit worthiness of Buyer.**
2. Agrees to pay invoices when due pursuant to the terms approved by Boelter's credit department. Invoices issued upon delivery and/or monthly statements reflect terms of payment. Boelter reserves the right to withdraw or change the credit terms without prior notice, except as otherwise provided by law.
3. Agrees to pay a service charge of 1.5% monthly on unpaid past due balances.
4. Agrees to pay a service charge of \$35 for each check returned by Buyer's bank, provided that such charge does not violate any laws of the applicable jurisdiction.
5. Agrees to pay all reasonable cost of collection, including attorney's fees, incurred by Boelter's attempts to collect any amounts owed Boelter by Buyer.
6. Agrees to immediately notify Boelter by certified mail to the attention of the Credit Department of any change of ownership of Buyer.
7. Submits to venue in a court of appropriate jurisdiction in the same county or venue where Boelter maintains its office, and waives the right to trial by jury, where permitted by state law.
8. Agrees that a faxed copy of this credit application and all signatures can be considered valid as the original.
9. Grants to the Boelter Companies, Inc. and its affiliates a security interest in all goods sold pursuant to this agreement to secure the payment and performance of its obligations hereunder.
10. The person signing this contract specifically represents that he/she has the authority to execute this contract on behalf of the Buyer.

Name of Company _____

Signed By _____ Title _____

Print Name _____ Date _____

INDIVIDUAL PERSONAL GUARANTY

To induce The Boelter Companies, Inc. including its affiliates, (Boelter) to sell merchandise on open account to applicant, I, jointly and severally with any other guarantors, unconditionally guaranty the prompt payment and performance when due any indebtedness or obligation owed by Buyer to Boelter and incurred or arising prior to or during the term of the guaranty (the "Obligations"). The "Terms Agreement" set forth above are incorporated into this guaranty and I agree to be bound by them.

I execute this guaranty as an individual and not in any representative capacity. This guaranty shall continue in full force and affect until such time as all Obligations shall have been indefeasibly paid in full. I waive acceptance hereof, presentment, and any notice relating to the obligations and any right of subrogation or reimbursement against the Buyer. I further agree that this guaranty shall not be affected by any extension, renewal, settlement, waiver or release with respect to the Obligations, any failure or delay to collect from the Buyer or other guarantor or any other act, omission or delay by Boelter that might, but for provisions of this paragraph, constitute a legal or equitable discharge of my obligations hereunder.

Dated as of this _____ day of _____, 200__.

Guarantor's Signature

Guarantor's Signature

Guarantor's Social Security Number

Guarantor's Social Security Number