

2825 Temple Ave, Signal Hill, CA 90755 Ph (562) 988-3100 Fax (562) 988-3190

# ATTN: CREDIT DEPT

Thank you for downloading our credit application. It should take you just a few minutes to fill out. When you're done, please <u>FAX</u> your application to our credit department at (562) 304 -1990. Be sure to include this cover page. While we're working on processing your application <u>we need you to mail us the original copy with your signature to our corporate office in Signal Hill</u>. If you're going to be reselling this material be sure to download and <u>FAX</u> a resale card with the appropriate information.

Under normal circumstances it takes four to five days to process your application. Don't forget - we are dependent on your references responding to our request for information, so make sure you include their FAX number. If they are slow in responding it may take us a little longer.

If we need more information, we'll notify you right away. We value you as a customer and want to get you on board as soon as possible. If you have any questions you can call Gaby Herrera. While she may not know the current status of your application, she will make sure that any questions or concerns you have are taken care of immediately. Gaby's contact information is (562) 304 -1945 or gaby.herrera@walterswholesale.com.

Thanks!

Company Name:
Credit Contact (in case we have a question)
Contact Phone:
Contact fax:
Contact e-mail:
Preferred method of contact (please circle one): phone / fax / e-mail
How did you hear of Walters?

Would you like information on our trip? YES / NO



### 26 Locations in Southern California

## **CREDIT APPLICATION**

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2825 TEMPLE AVE	- SIGNAL HILL - CALIFORNIA 90755	- (562) 988-	-3100 - FAX (56	52) 9883190

To WALTERS WHOLESALE ELECTRIC CO. : For the purpose of procurring and establishing credit , from time to time , with WWE the undersigned Applicant furnishes the following information , and includes a Financial Statement. Applicant represents and warrants said information is true and correct and a true and complete statement of its financial condition.

Salesperson	Branch / Location

Application Date

Applicant's Website address

### NAME / ADDRESS

1	Applicant: Business or Corporate name		Business Phone #		Yea	Year Business Establised			
2	Business street address			Business bi	lling address or P	O Box			
3	City	State	Zip	City			State 2	Zip	
	BUSINESS INFORMATION	•	•						
4	We are engaged in the business of :	Approx. Ne	t worth of business	Business is	Sole Propriet	or Corporation	Partnersh	ip	
5	Contractor License #	Resale Pern	nit #	Number of	Employess Busi	iness Building is		Owned	Rented
	<b>OWNERS</b> (If applicant is sole propriet	tor or partner	ship) <b>OFFICERS</b>	(If a corporation	on)				
6	Name	Title	Home phone #		Home address			Own	Rent
7	Name	Title	Home phone #	Home address				Own	Rent
8	Name	Title	Home phone #		Home address		Own	Rent	
	BANK OR SAVINGS AND LOAN		IATION						
9	Name	Branch address		Acct #		Type of	f account		
10	Name	Branch address			Acct #		Type of	f account	
	APPLICANTS PRIMARY SUPPLI	ERS (Su	ppliers require we F	AX our credi	t inquiries)				
11	Name	Fax #			Account #			Amou	nt owed
12	Name	Fax #			Account #		Amou	nt owed	
13	Name	Fax #			Account #		Amou	Amount owed	
14	Name	Fax #			Account #		Amount owed		
	QUESTIONS FOR APPLICANT	•							
15	Has applicant or any of its owners , principles , partners , officers , directors ever filed a petition Yes No						rrent?		
	in bankruptcy , been adjudged bankrupt , or ma	de an assignm	ent for the benefit of cre	editors?				Yes	No
	Has a tax lien or civil suit been filed against ap			-			ears?	Yes	No
17	Is applicant or any of its owners , principals ,	partners , offi	cers , directors a guara	ntor or endor	ser of debits or not	es by others?		Yes	No
18	If applicant has an order pending with W	/WE - what is				requested by app	olicant?	\$	
ļ			Spaces below a	are for WV	VE use only			1.1	
	V.P of credit approval					Ap	pproval	aate	

In consideration of Walters Wholesale Electric Co. (referred to herein as WWE), extending credit to Applicant, Applicant agrees to pay for all items delivered to or at the request of Applicant by WWE within thirty (30) days from the date of WWE's invoice for said items. The applicable discount may be taken if the invoice is paid not later than the tenth of the month following purchase; NET thereafter. All accounts are due and payable at the remittance address shown on the WWE invoice. Applicant acknowledges that a service charge computed on the basis of 1% per month for all sums due to WWE, which have not been paid within thirty (30) days from the invoice date, will be charged to Applicant by WWE, and Applicant agrees to promptly pay said service charge. The service charge will be due and payable on the thirty-first (31<sup>st</sup>) day after the invoice date and an additional service charge, computed on the same basis, will be due and payable every thirty (30) days thereafter. Waiver of any one or more service charges shall not be deemed to be a waiver of future service charge. In the event that WWE commences litigation or employs attorneys in order to secure payment of any sums due to it from Applicant, the Applicant agrees to pay a reasonable attorney's fee in addition to all other sums due. The undersigned warrants that the above agreement has been carefully read and the Applicant understands the same.

Applicant authorizes WWE to obtain credit and financial information concerning the Applicant at any time and from any source.

APPLICANT'S INFORMATION:			
Executed at	, on this	day of	, 20
APPLICANT'S SOCIAL SECURITY NO.			FEDERAL TAX NO.
APPLICANT'S DRIVERS LICENSE NO.			PRINT NAME OF APPLICANT
APPLICANT'S TITLE			APPLICANT'S SIGNATURE

#### IF BUSINESS IS CORPORATION

I/We personally guarantee payment for all materials purchased by Applicant. (This is a continuing guarantee which shall remain in force until revoked by Written notice, which notice shall be effective only as to transaction entered Into after receipt thereof by WWE.)

PERSONAL GUARANTOR'S SOCIAL SECURITY #

PERSONAL GUARANTOR'S SIGNATURE

PERSONAL GUARANTOR'S SOCIAL SECURITY #

PERSONAL GUARANTOR'S SIGNATURE