

# BORRMANN METAL CENTER, INC.

110 West Olive Ave.  
Burbank, CA 91502

Phone (818) 846-7171 • (800) 801-2677  
Fax (818) 846-9347

12771 Brown Ave.  
Bloomington, CA 92316

INTERNAL USE ONLY

CODE	
TERMS	
LIMIT	
DATE	
SALESMAN	
TERRITORY	

## CREDIT APPLICATION/AGREEMENT

### APPLICANT'S INFORMATION

The following information is provided for the purpose of my (our) obtaining commercial credit and, if granted, continuing to maintain commercial credit from Borrmann Metal Center, Inc. ("Seller"). Seller is authorized to contact the references listed below and any other source of commercial credit that Seller deems reasonable for the purpose of gathering credit information related to this application and disseminating credit information pursuant to normal commercial credit inquiries. "Seller" is hereby released of any liability by the applicant in this regard.

Legal or Corporate Name \_\_\_\_\_ ("Applicant") Phone No. (\_\_\_\_\_) \_\_\_\_\_

Name of Parent Company (if any) \_\_\_\_\_ Fax No. (\_\_\_\_\_) \_\_\_\_\_

Billing Address \_\_\_\_\_ Email Address \_\_\_\_\_

Shipping Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Approx. Net Worth \_\_\_\_\_ Approx. Annual Sales \_\_\_\_\_ Federal Tax ID \_\_\_\_\_ Date of Present Ownership \_\_\_\_\_

APPLICANT REQUESTS A CREDIT LIMIT OF \$ \_\_\_\_\_ Resale Number \_\_\_\_\_

Accounting Dept. Contact \_\_\_\_\_ Accounting Dept. Phone \_\_\_\_\_

### OFFICERS/PRINCIPLES

Name	Title	Home Address	Social Security Number
_____	_____	_____	_____
_____	_____	_____	_____

### CREDIT INFORMATION

List three (3) major supply sources (including metal/steel) that the APPLICANT has open accounts and is currently doing business:

Name 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

Phone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

List all Bank References (Bank) (Bank Phone) (Bank Account No.) (Bank Contact Name)

Has Applicant or any Principal ever done business with Seller previously?  Yes  No If yes, list name under which credit was applied for: \_\_\_\_\_

Has Applicant or any Principal thereof ever filed for bankruptcy?  Yes  No If yes, attach sheet giving full and complete details.

### AGREEMENTS, TERMS AND CONDITIONS

The above statement has been carefully read and all representations made are correct and true. Seller's terms of sale are 1/2% discount 10 days, net 30 days from date of invoice. I agree that past due accounts shall bear interest at the highest lawful rate not to exceed two percent (2%) per month until paid in full. Shipments, deliveries, and performance of work shall at all times be subject to Seller's Credit Department. Seller, in its sole discretion, may, at any time, decline to make any shipment or delivery except upon receipt of payment or other terms that shall be satisfactory to Seller's Credit Department. In any action to collect my (our) debt, I hereby agree to pay all costs incurred by Seller, including attorney's fees, fees charged by a collection agency, and court costs through appeal. The undersigned has read this Credit Application/Agreement and agrees to be bound by its statements, terms and conditions stated herein. The undersigned represents and warrants that he/she is duly authorized to sign this credit application on behalf of Applicant.

By: \_\_\_\_\_  
(Applicant Signature) (Applicant Name and Title) (Social Security #) (Application Date)

A FAX COPY OF MY SIGNATURE MAY BE CONSIDERED THE ORIGINAL

### PERSONAL GUARANTY

In consideration of Seller extending credit to the above applicant, the undersigned does hereby personally and unconditionally guarantee to Seller the payment of sum or sums of money as may hereafter become due to Seller on account of goods or services provided to the applicant. The undersigned also guarantees payment of all costs of collection of past due accounts, including collection agency fees and reasonable attorneys' fees in the trial court and appellate court. The undersigned acknowledges that Seller may investigate the credit history of the undersigned and consents to such an investigation and waives any claim it may have against Seller or its agents in connection with such an investigation.

(Date) (Print name and Sign as an Individual) (Date) (Print name and Signature as an Individual)



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State Board of Equalization requires this resale card to be fully completed.

Please do the following:

1. Clearly type or print all requested information
2. Be sure to sign the resale card
3. Once completed, fax resale card in order to process your order

If you have any questions, feel free to call me at 818-846-7171.

Thank you in advance for your cooperation.

Letty Valadez

Accounts Receivables

FIRM NAME

I HEREBY CERTIFY,   
That I hold valid seller's permit No.   
issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling

that the tangible personal property described herein which I shall purchase from:  
Borrmann Metal Center, 110 W. Olive Ave., Burbank, CA

will be resold by me in the form of tangible personal property; PROVIDED, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay for the tax, measured by the purchase price of such property.

Description of property to be purchased:

Dated  \_\_\_\_\_ 19 \_\_\_\_\_ Signature

at \_\_\_\_\_ By and Title

Phone  \_\_\_\_\_ Address