

**HELM PAINT & SUPPLY INC**  
**8180 EARHART BLVD. NEW ORLEANS, LA 70118**

**Phone #: 504-861-8179**  
**Fax #: 504-861-9210**

**COMMERCIAL CREDIT APPLICATION**

Date:

**TO OUR APPLICANT:**

We request that you complete the application fully and sign in the proper place. You may fax the application to us, but it is very important that you return the original form to the above address.

**(APPLICANT INFORMATION)**

Full Legal Name:		Phone #:	
Physical Street Address:		Cell #:	
City:	State:	Zip:	Fax #:
PO Box:	City:	State:	Zip:
Email Address:		Federal ID #:	
Person Responsible For Payment:		Phone #:	
Date Business Started:	If incorporated, in what State:	Estimated Monthly Purchases:	

Tax Exempt? Yes [ ] No [ ] If yes, certificate must be attached to application to qualify.

No. of Employees:

Type of Business: Corporation [ ], Partnership [ ], Proprietorship [ ], LLC [ ], Limited Partnership [ ]

Business Category (Example: Painter, Builder, Cabinet Shop, Etc.):

Place of Business: Do you lease [ ], Rent [ ], Own [ ]

Do you work from Shop [ ], Home [ ]

Require any of the following (Please check): Purchase Order # on Invoice [ ], Weekly Invoices Sent [ ]

Job Site Address:

Authorized Purchasers (Provide List):

**CREDIT REFERENCES: (If more space is needed, please provide separate sheet)**

Name:	Account#	Phone No.	Fax No.

**PRINCIPAL OWNER OR ALL PARTNER**

Name:	Social Security #:	Date Of Birth:
Phone #:	Email:	
Street Address:	Cell #:	
City, State, Zip		

Name:	Social Security #:
Spouse's Name:	Social Security #:
Phone #:	Email:
Street Address:	Cell #:
City, State, Zip	

Credit Terms

The information as set forth above is furnished for the purpose of requesting Helm Paint & Supply Inc. (hereinafter called the Company) to grant and extend me/us credit for the purchase of merchandise on your open account terms. The undersigned acknowledge that this account is for commercial purposes and not for personal, household, or family purposes.

The undersigned agree, jointly and severally, to pay any and all sums that may become payable under this account for merchandise sold to the applicant or to any person with apparent authority to utilize this account, unless notified to the contrary in writing by the applicant according to the credit terms of this Company: **Payment terms are Net 20<sup>th</sup> end of following month from date of purchase.** All past due balances are subject to interest of 1 1/2% per month ( 18% annual percentage rate). The undersigned agree(s), to pay collection fees and/or attorney's fees of 33 1/3% of the outstanding balance of this account, plus all expenses (except where prohibited by law) in the event collection becomes necessary. The undersigned further agree(s) that any controversy or claim arising out of or relating to these credit terms or breach thereof shall be brought in the appropriate court.

The applicant, guarantors and others from time to time obligated under this account hereby jointly and severally waive and renounce the benefit of homestead and all other exemption rights as against this indebtedness or any renewal or extension hereof; and further waive demand, protest, notice of protest, presentment for payment, notice of dishonor and all defenses on the ground of extension of time for payment hereof (except where prohibited by law).

This credit application shall remain in full force and effect until the Company shall have received written notice of: instructions to create no further transactions under the terms and conditions of this credit application, a change in business ownership, or changes of any type. A certified mail receipt for such notifications shall be conclusive evidence. Of the said receipt of such notice. Facsimile copy of this document will have the same force and full effect of the original document.

**\*Note\*** - The undersigned individual(s) who is/are either the principal, partner, or guarantor of the credit applicant(s), a sole proprietor of the credit applicant, is the sole member of a limited liability company who is the credit applicant, or is an officer or director of the credit applicant(s), recognizes that his or her individual credit history may be a factor in the evaluation of the application for credit by the credit applicant for credit with Helm Paint & Supply Inc. and hereby consents to and authorizes Helm Paint & Supply Inc. or its representative, obtaining and using a Consumer Credit Report on the undersigned from time-to-time as may be needed in the credit evaluation process.

By:	By:
Name Printed:	Name Printed:
Title or Capacity:	Title or Capacity:
Date:	Date:

**Personal Guarantee**

In consideration of the Company extending a line of credit to the Applicant, I/we agree jointly and severally, to **personally guarantee** prompt payment, upon demand by the Company, of any and all debts owed to the Company by the Applicant named in this credit application. I/we fully understand and agree to be legally bound by all Credit Terms shown above in this credit application.

Print Name:	Print:
Signature:	Signature:
Social Security #:	Social Security #:
Date:	Date:

**CREDIT DEPT USE ONLY**

Account #:	Customer Class Code:
Price Level:	Outside Sales Rep Assigned:
Store Manager Authorization:	Store #
Credit Limit:	Approved by: <span style="float:right">Date:</span>