

# First Class Cabinets Wholesale LLC

## ACCOUNT APPLICATION

### CONTACT INFORMATION

BUSINESS NAME							
MAILING ADDRESS				CITY	STATE	ZIP	
SHIPPING ADDRESS				CITY	STATE	ZIP	
PHONE		FAX		EMAIL			

### ACCOUNT INFORMATION

TAX STATUS	<input type="checkbox"/> TAXABLE	<input type="checkbox"/> EXEMPT
BUSINESS TYPE		
RESALES TAX #	US FEDERAL ID #	

### DIRECTOR(S)/OWNER(S)

NAME	DRIVERS LICENCE #	STATE
ADDRESS	PHONE	
NAME	DRIVERS LICENCE #	STATE
ADDRESS	PHONE	

### ACCOUNT PAYABLE CONTACT

NAME			
PHONE	FAX	EMAIL	

### TRADE REFERENCES

BUSINESS NAME			CONTACT NAME
PHONE	FAX	EMAIL	
BUSINESS NAME			CONTACT NAME
PHONE	FAX	EMAIL	

In submitting this application and as a condition for any credit extended based on this application, the applicant and the undersigned individuals, both individually and collectively, undertake the responsibility to guarantee the full payment of all amounts that may become due to First Class Cabinets Wholesale LLC. Additionally, we commit to covering all costs associated with collection efforts, including reasonable attorney fees incurred by First Class Cabinets Wholesale LLC. in the process of recouping any outstanding debts from any of the individuals or entities listed in this application.

Should an account be established as a result of this application and payments not made promptly, the outstanding balance will accrue interest at a rate of 1.5% per month, equating to an annual rate of 18%. All payments for goods and merchandise acquired from First Class Cabinets Wholesale LLC are to be remitted to First Class Cabinets Wholesale LLC. Importantly, all merchandise obtained from First Class Cabinets Wholesale LLC shall remain the property of First Calss Cabinets Wholesale LLC until the full payment has been made.

We fully comprehend these terms and pledge to adhere to them. The information provided in this application is to the best of our knowledge accurate and complete.

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*Print*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*