Application for Credit

Garza Roofing Equipment and Supply, LLC

901 Elizabeth Street, Elgin IL 60120

Date: Applicant's Firm Name:

Trade Name (DBA):

Address:

Business Phone: Email:

FED Tax ID #: Date Business Started:

Credit Amount Requesting:

Select One: Corporation Partnership Sole Proprietor Other

Name of Individuals in Firm (Must Be Filled Out):

Name: Title:

Home Address:

Home Phone: Do you: Own Rent

SSN #: Date of Birth:

Driver's License: State:

Need Signature Of Applicant Below:

I do herby authorize the release to Garza Roofing Equipment and Supply, LLC, of any and all information requested by them in the processing of this credit application. The credit terms are NET 30 Days from date of invoice, unless otherwise stated on invoice. A LATE CHARGE OF 1.5% (one and ½) PER MONTH will be charged on balances outstanding at the close of the next billing cycle. Any returned goods must be in original condition as determined by the seller and are subject to a 15% RESTOCKING FEE. It is mutually agreed that if this account is 60 days or more past due, it may be sent to an attorney for collection. If so, there shall be an attorney's fee of 20% added to the amount due, and the attorney's fees are agreed to be reasonable.

Signer's Name in Print: Date:

Signed: Title:

***Must be signed or application will NOT be processed**

Application for Credit

Garza Roofing Equipment and Supply, LLC

P.O Box 326 Algonquin, IL 60102

Bank Reference:

Bank Name: Account Number:

Address:

Phone Number:

Trade Reference:

Name: Account:

Address:

Phone: Email:

Name: Account:

Address:

Phone: Email:

Name: Account:

Address:

Phone: Email:

Application for Credit

Garza Roofing Equipment and Supply, LLC

P.O Box 326 Algonquin, IL 60102

Guaranty of Payment:

In order to induce you to sell merchandise and extend credit to the above applicant(s) the undersigned here-by guaranty unto Garza Roofing Equipment and Supply, LLC the payment of any indebtedness of **(Name of Applicant)**

now existing or which is incurred hereafter and in whatever form evidenced. This is to be continuing guaran-tee until all payment of indebtedness is made. It is not to be limited in any manner. When and if this account is placed in the hands of an attorney for collection of any amounts unpaid and owing, I (we) guarantee and agree to pay attorney's fees of 20% of the amount due which is agreed to be reasonable for collection, in addition to

Signer's Name in Print:

Signature:

***Must be signed or application will NOT be processed**

Address:

Phone:

SSN#:

Signer's Name in Print:

Signature:

***Must be signed or application will NOT be processed**

Address:

Phone:

SSN#:

630-229-4440 RG / 847-693-0793 JG

rich@garzasupply.com / jennica@garzasupply.com