

AAA Furniture Wholesale

10301 Harwin Drive, Houston, TX 77036, Tel:(713)777-5888, Fax:(713)777-0585

APPLICATION FOR A 30 DAY ACCOUNT AND PERSONAL GUARANTY OF PAYMENT

Name of Firm or Corporation _____

Street _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Owner Name _____

The following information is submitted for your consideration as a basis of extension of credit to us:

We operate _____ We have been established since _____ Year.
(Type of Business)

Our legal entity is: Corporation Co_Partnership Proprietorship

(If a corporation, list names of officers & titles. If not, list names of partners or owners.)

Name	Home Address	City	Home Phone
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Amount of Credit Desired:\$ _____

The following are 3 trade references that we presently doing business with.

(Note: Please furnish complete street address, city, state, zip and phone number)

We bank at:(Note:Please furnish complete street address, city, state, zip and phone number)

Tax Exempt No. _____ (Please attach copy of certificate)

Business License No. _____ (Please attach copy of certificate)

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By signing this application, it is agreed that payments on all accounts, resulting from the sale of goods and/or services, are due and payable IN FULL, NO LATER than 30 days after receipt of such goods or services. \$25.00 will be charged for any late payment. In addition, an interest of 18% per annum will be applied to any unpaid or outstanding balance. 25% restocking charge will be applied for any canceled orders. Regular terms are net 30 days. Should litigation or collection action be necessary or result due to default of payment of the above balance (Plus any interest due), all legal fees, court expenses, and any and all other reasonable expenses incurred by AAA Furniture Wholesale, Inc., to enforce payment of the balance due on this account, will be paid by the party whose signature appears hereon.

The party signing this agreement acknowledges that he/she will be individually liable on this account, that he/she has full authority to act as agent for the party in whose name this agreement is placed, and that he/she may be jointly and severally liable with the party in whose name this agreement is placed.

Signed by President and/or Owner _____ Date _____

I hereby sign as personally liable _____ SSN _____

Home Address _____

City _____ State _____ Zip _____ Home Phone _____