Legal Business Name: _____

DBA: _____

Bill To: _____   **Ship To:** _____

Address: _____   **Address:** _____

City/State: _____ **Zip** _____   **City/State:** _____ **Zip** _____

Contact Person: _____   **Email:** _____

Phone: _____ **Fax:** _____   **Type of business (circle one) Sole Propietorship   Partnership   Corporation**

State Sales & Use Tax Permit #: _____ **State:** _____ **Federal Tax ID**#_____ **# of Locations:** _____
**Please Include a Copy of the Tax Cert with this Application.

Business Established Date:_____ **Mortgage holder/Landlord**_____

Trade References:

Company Name	Account#	Phone#	Fax#	Contact Name
1)				
2)				
3)				

AUTHORIZATION & RELEASE OF FINANCIAL INFORMATION

I hereby authorize Kerusso, Inc. to order any credit, financial or background information necessary on my company in order to establish credit. A photocopy of this authorization is to be accepted with the same authority as the original. The signature must be hand written and not a stamp. An electronic signature is acceptable. In the event any third parties are employed to collect any outstanding monies owed by said business, the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation occurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Authorized Signature: _____   Date: _____

Printed Name: _____   Are you the owner of the business: Yes* or No

PERSONAL GUARANTEE

*This section is optional

In consideration for Kerusso extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees, unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to Kerusso by the business identified below whether said sums are due under open account, contract or otherwise.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by Kerusso. Said notice shall specify the date on which this guaranty is to be terminated, said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date_____   Name:_____
                                                                          (Name of person guaranteeing payment, NO TITLE)

Signature of person guaranteeing payment_____

Home Address_____

Home Phone#_____   Cell Phone#_____

Name of Business whose account is guaranteed_____

1.9.17