

MARSHALL'S INDUSTRIAL HARDWARE, INC.
8423 PRODUCTION AVE.
SAN DIEGO, CA 92121-2022

TEL. NO. (858) 271-5555
FAX. NO. (858) 271-6077

COMMERCIAL CREDIT APPLICATION

The information provided below is supplied for the purpose of obtaining credit with Marshall's Industrial Hardware, Inc. (Marshall's) and is warranted to be true and complete.

ACCOUNT AGREEMENT AND TERMS OF SALE

The undersigned does hereby certify to be empowered and authorized by the BELOW NAMED FIRM to enter into the following Account Agreement. The BELOW NAMED FIRM agrees to comply with the following Terms of Sale: 1% 15 Days, Net 30. All payments are less 1% IF PAID within 15 days of the invoice date. Checks must not be postmarked later than 15 days from the invoice date to qualify for the 1% Discount. If payment is not received within 30 days of the invoice date, this agreement shall be deemed breached. It is agreed that Seller's actual damages caused by such a breach are difficult and impractical to determine and include, among other things, administrative costs for billing, accounting for and collecting past due payments as well as the cost to the Seller of the amounts past due. The undersigned Firm agrees to pay the Seller delinquency charges on all amounts past due at the rate of 1 ½% per month until paid. This is agreed to be a reasonable method for fixing seller's damages so arising. The undersigned Firm agrees to pay the Seller's reasonable attorney's fees, incurred with or without suit, to collect any amount unpaid. No claims for shortages or deductions allowed after 24 hours of delivery. Credit is allowed on stock items returned, subject to condition of item. Special orders and cutting tools may not be returned.

The BELOW NAMED FIRM agrees to notify Marshall's Credit Department by telephone, fax, letter or other reasonable means in the event an unauthorized use of their account has occurred or may occur within a reasonable time after the discovery there-of. There exists a duty to Marshall's to reasonably assist Marshall's in determining the facts and circumstances relating to any unauthorized use of this account.

(Account Name)

(Customer's Signatures)

(Date)

(Print Name)

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Account Name: _____

Address: _____ City & Zip Code: _____

Mailing Address: _____

Phone Number: _____ Fax Number: _____

For Corporation:

(A) Date Incorporated: _____ President: _____

Vice Pres: _____

(B) Name of Parent Co: _____

For Partnerships and Sole Proprietorships:

(A) Date-Start of Business: _____

(B) Owners Name: _____ SS#: _____

Owners Name: _____ SS#: _____

Credit References:

Name	Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

P.O. Required? ___yes___no **Resale?** ___yes___no (If yes, include Resale Card)

Please list those persons authorized by your company to sign for purchases: _____

Have you ever applied for credit with MARSHALL'S INDUSTRIAL HARDWARE, INC. under this name or another name? If yes, under what name? _____

****PLEASE FILL OUT BOTH SIDES****