MOORE Supply Co.

P.O. BOX 448
CONROE, TEXAS 77305-0448
ATTN: CREDIT DEPT.

(936) 756-4445
FAX (936) 756-4484

APPLICATION FOR CREDIT

Branch:_____ Salesman #_____ Date Credit Dept. Received:_____ NEW ACCT #_____

Legal Name of Company_____

Additional Trade Name (D/B/A):_____Phone_(_____)_____

Billing Address:_____City:_____State:_____Zip:_____

Street Address:_____City:_____State:_____Zip:_____

Applicant is: ( ) Corporation ( ) Partnership ( ) Proprietorship ( ) Limited Liability Company ( ) Gov. Agency

In business since:_____ If incorporated, state & date of incorporation:_____ Tax ID #_____

Type of business: _____ if [ ] PLUMBING - specify ❑ RESIDENTIAL ❑ COMMERCIAL ❑ REPAIR ❑ NEW CONST.

If Co. is: ( ) Subsidiary ( ) Branch ( ) Division, show name & address of Parent Co._____

_____

OWNER(S), PARTNERS OR CORPORATE OFFICERS:

Name_____ Title_____ Home Phone:_____

Home Address:_____ City:_____ State:_____ Zip Code:_____

Driver's Lic.#_____State:_____ Soc. Sec. #:_____ Date of Birth:_____

Name_____ Title_____ Home Phone:_____

Home Address:_____ City:_____ State:_____ Zip Code:_____

Driver's Lic.#_____State:_____ Soc. Sec. #:_____ Date of Birth:_____

Name_____ Title_____ Home Phone:_____

Home Address:_____ City:_____ State:_____ Zip Code:_____

Driver's Lic.#_____State:_____ Soc. Sec. #:_____ Date of Birth:_____

BANKING:

1. Name:_____ Address:_____ Phone:_____ ( ) Check

Officer Handling Account_____ Account No. (s)_____ ( ) Loans

2. Name:_____ Address:_____ Phone:_____ ( ) Check

Officer Handling Account_____ Account No. (s)_____ ( ) Loans

ESTABLISHED MATERIAL SUPPLIER REFERENCES

NAME	Address (include city, state & zip)	Telephone Number	Account Number
		(____)_____	
		(____)_____	
		(____)_____	
		(____)_____	
		(____)_____	
		(____)_____	

Person in charge of Accounts Payable:_____Telephone No. (_____)_____FAX No. (_____)_____

Normal monthly credit required $_____(Estimate)

Purchase Order numbers required on most purchases? ❑ Yes ❑ No Job Names or Numbers required on most purchases? ❑ Yes ❑ No

Do you prefer or require separate billing statements for each job in most instances (as for Job Costing Purposes or Tax Exemption Status)? ❑ Yes ❑ No

❑ Email invoices to:_____ ❑ Fax invoices to:_____ ❑ Daily ❑ Weekly ❑ Monthly

Are you Tax Exempt on all purchases? ❑ Yes ❑ No IF YES, PLEASE FURNISH AN EXEMPTION CERTIFICATE. (A Tax Permit Copy is not acceptable.)

PLEASE ATTACH A CURRENT FINANCIAL STATEMENT. If you are newly formed Company, Partnership, or Proprietorship, please attach personal financial statements on the owners.

BACK OF APPLICATION MUST BE SIGNED
BEFORE PROCESSING
(OVER)

I (we) understand that the information furnished on this application is for the purpose of obtaining credit from the HAJOCA CORPORATION and/or LCR-M LIMITED PARTNERSHIP, it's successors and affiliates ("CREDITOR") ,and that I am, (we are) authorized to bind my (our) firm accordingly, and that all accounts or monies due CREDITOR shall be due and payable at the remittance address shown on the invoice. Applicant agrees that each of the terms and conditions of sale stated on the invoice or delivery ticket shall be terms in addition to those set out herein. Applicant agrees to be bound by such terms. No terms or conditions of purchase orders different from the terms of CREDITOR will become part of any sales agreement, purchase, or other document unless specifically approved in writing by CREDITOR. All payments may be applied as against open charges at the discretion of the CREDITOR. In the event that from time to time CREDITOR may owe credits, refunds, reserves, or other moneys to the undersigned, such indebtedness shall be deemed to be created from this Agreement, and CREDITOR shall have the right to recoupment of such credits or refunds within its sole discretion. Service charges on any account thirty days past due shall accrue at the rate of 1.5% per month (18% per annum) or the maximum non-usurious rate at the time the account is 30 days past due. Additionally, the undersigned agrees to be responsible for all internal and external collection costs and attorney's fees in connection with any deliquent amount placed for collection by the CREDITOR. In the event of litigation, venue shall be exclusively in Montgomery County, Texas. The undersigned agrees to waive all venue objections, notice of sale and delivery of goods, extention or rearrangement of terms, and change in credit limit. CREDITOR may terminate any credit availability at any time within its sole discretion. No items will be accepted for return without prior approval, and all returns will be subject to a restocking charge. CREDITOR makes no warranty either express or implied, including warranties of merchantability or fitness for any particular purpose, and CREDITOR shall not be liable for lost profits, consequential, special or other damages. All warranties, if any, are by the manufacturers of the goods. I (we) acknowledge and agree to these terms and any terms and conditions as they appear on the front or reverse side of the invoices issued by CREDITOR. In the event of an ownership change, written notice must be sent to the CREDITORS Credit Department by Certified Mail.

UNCONDITIONAL PERSONAL GUARANTY

In consideration of credit being extended to the firm or individual making this application for credit, I (we) or any and all heirs, executors, and administrators, agree to unconditionally personally guarantee the entire above-mentioned obligation as a primary obligation and not a secondary one. I (we) further agree that this guaranty is an absolute, complete and continuing one and is payable and performable at the offices of CREDITOR, upon the same terms described above. I (we) may be sued individually without demand or joinder of any others or the firm, as to amounts owing by the firm or individual making this application. Revocation of the personal guarantee must be sent to the CREDITORS Credit Department by Certified Mail.

CREDITOR is authorized to investigate my/our credit including, but not limited to, obtaining reports from any credit-reporting firm, or verifying any credit information.

SIGNATURE OF OFFICERS/OWNERS REQUIRED

SIGNATURE:_____**(PRINT)**_____**(DATE)**_____

SIGNATURE:_____**(PRINT)**_____**(DATE)**_____

SIGNATURE:_____**(PRINT)**_____**(DATE)**_____

COMPLETE THE CERTIFICATE BELOW ONLY IF ALL SALES ARE EXEMPT FROM TAX

TEXAS CERTIFICATE OF RESALE

Purchaser:_____Company Name:_____

Street Address:_____I Hold Limited Sales Tax Permit No._____

The taxable item described below, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions, in its present form or attached to other personal property to be sold. I understand that if I make any use of the item other than retention, demonstration or display while holding it for sale, lease or rental, I must pay sales tax on the item at the time of use based upon either the purchase price or on the fair market rental value for the period of time used.

I understand that it is a misdemeanor to give to the seller a resale certificate for taxable items which I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease, or rental and that upon conviction I may be fined not more than $500 per offense.
Seller: HAJOCA CORP. and/or LCR-M L.P. 200 West Loop 336 North P.O.Box 448 Conroe, Texas 77305

Discription of the property to be purchased_____

Provide a description of the type of business activity generally engaged in or the type of items normally sold by the purchaser_____

Sign Here for Exemption:_____Date:_____Phone:_____
*Or, registration number from retailer's state or date permit was applied for.

FOR OFFICE USE ONLY

CUSTOMER MARKET CLASS CODE:_____ N/P? ( ) YES ( ) NO PROFILE#:_____
( ) CREDIT APPROVED ( ) CREDIT DENIED - BY CREDIT MANAGER:_____DATE:_____
CREDIT LIMIT: $_____ C/L LTR? _____COMMENTS:_____