



3125 Cockrell Lane - Springfield IL 62711 Phone: 217.793.4300

FOR THE PURPOSE OF ESTABLISHING CREDIT ACCOMMODATION WITH YOU, THE FOLLOWING INFORMATION IS PROVIDED. APPLICATION FOR BUSINESS ACCOUNT

Please print or type.

INFORMATION ABOUT THE APPLICANT: Estimated Mor							nthly Purchases: \$			
Business ("Applicant	") Legal Name:									
Business Street Address	SS:									
City:	ty: County:					Sta	te:	Zip:		
Office Phone:			N	Mobile Ph	one:_					
Email:				Web	site:_					
Date Business Establis	shed:			_ Date	e Curr	ent Ownersl	nip Establis	hed:		
Business's Annual Sale	No. Employees:									
Type of Business:	☐ C-Corporation	☐ S-Corp	oration	□ So	ole Pro	oprietorship		Partnership	□ LLC	
	☐ Other (Describe) _									
Federal Taxpayer ID #:					_	D&B #:				
INFORMATION A	any of its Principals e any of its Principals e ase provide complete BOUT THE PRII	ever been a defe ever defaulted or e details on a se	ndant to a clair n a loan? parate sheet a	m, judgmend attach	to this	x lien, lawsus	it, or pendir	ng litigation?	☐ Yes* ☐ Yes* ☐ Yes*	□ No □ No □ No
Please list below the principal(s)/partner(s))/owner(s) who own	20% or more	, as applicable of the Compan	e, of Corp y, are re	orate	Officer(s), ed to provid	all Partner de his/her/f	heir Social Secui	rity number(s) b	pelow.
PRINCIPAL NAME(S)	POSITION	RESIDENCE	ADDRES	SS & F	PHONE NO.		% OWNERSHIP	SSN	BIRTHDATE
	d in the State of (CDC License #	, #				Mechanical Kitchen/Bath School, Chu Sewer & Wa	n Remodele rch	r □ Ger □ Ret	Iding Maintenan- neral Contractor ail Dealer nufacturer/OEM	
SPECIAL REQUIREM Do you require a Purch Do you require a Job N Is a signature required Will purchases ordinari NOTE: We are required by law	nase Order Number of lumber on our invoic for delivery?	e?	□ Yes □ Yes □ Taxable	□ No □ No □ No □ Non		ble		structions: (Shop A		
Capitol Group Account	ing Emails: Accour	nts Receivable: a	ardept@capitol	groupinc.	com	Online	Payment To	ech Support: cg-bi	lltrust@capitolgr	oupinc.com
FOR CAPITOL GRO Application Received On: Documents & Information C Application:	hecked By:	Credit Lim	it Assigned: \$				Sales Repres	count Number Assigne sentative:		

Sign up to make payments online? ☐ Yes ☐ No - If yes, please provide first and last name and email address						
What email address(es) would y	ou like your statements and inv	roices sent to?				
Do you have any specific purch	ase restrictions? (e.g. certain er	mployees, no tools, etc.) ☐ Yes ☐ No	o - If yes, please explain			
		TRADE / BANK REFERENCES				
NAME:	ADDRESS:	ACCT #:	PHONE:	FAX:		
NAME:	ADDRESS:	ACCT #:	PHONE:	FAX:		
NAME:	ADDRESS:	ACCT #:	PHONE:	FAX:		
BANK NAME:	ADDRESS:	ACCT #:	PHONE:	FAX:		
balance at the maximum rate all of any future calculations of addi invoices each month in the amount of applicant agrees that those on Applicant's Purchase Corepresentative of the Seller. All attached financial statement) is to Seller make all inquiries deemed verify the accuracy of the statem agrees that all Terms and Condicapply to all sales and extensions complete and that Seller may consider the seller may	owed by law per month, and that itional service charge that may accurate of 2.0% (annual rate of 24.0% the TERMS represent the only te order, may add to, modify, supersother terms or conditions are here it is solvent and capable of meet true, accurate and complete. All it necessary including but not limit lents made herein to determine of sold as may be printed of so of credit made to Applicant by Sinsider it as continuing to be true. T: To secure payment and performs distributed by Seller, whenever wowned and hereafter acquired in Mechanical & Industrial Products rental; and all existing or subsect y from time to time hereafter comes between Seller and Applicant.	rms under which Seller will extend cresede, or otherwise alter the TERMS will eby rejected. Iting its obligations hereunder, and that such information has been submitted feted to pulling consumer credit reports or reditworthiness. Applicant also agrees in Seller's invoices, and as may be am seller. The undersigned represents and and correct until a written notice of charmance of all obligations, Applicant her sold, consigned, leased, rented or delinctuding but not limited to all Plumbing accessories and supplies. The securifuently arising accounts and accounts are into existence during the term of this most of the Circuit Court of St. Louis Court	d each month to Applicant's a cepts that a service charge we did to Applicant. No other ter thout express written approvable all information provided to Stor the purpose of obtaining con any owners or principals of the to comply with all applicable and the different that the information ange is given to the Seller by the servered, directly or indirectly, to preceivable, chattel paper, gets security Agreement. Seller and the seller of the security Agreement. Seller and the servered and the security Agreement. Seller and the security Agreement.	account balance for purposes will be added to past-due arms or conditions, including al signed by an authorized a signed by an authorized a seller (including Applicant's credit. Applicant authorizes of the company in order to be bulk sales laws. Applicant oplicant from time to time, shall in provided is true and the Applicant. The Money Security Interest in all to or for the benefit of Applicant Safety Products, Waterworks assessions and returns; and all neral intangibles, and security interest is explicitly the Missouri for any action arising		
Courts. Applicant waives any rig WARRANTY: The Applica SELLER HEREBY DISCLAIMS ALL E WARRANTIES OF MERCHANTABILIT	ght to a jury trial in the event of ar int's sole and exclusive warranty, if any, XPRESSED OR IMPLIED WARRANTIE IY AND FITNESS OR FITNESS FOR A	oplicant and Capitol Group, Inc., and a ny litigation relating to or arising out of is that provided by the Product's Manufacturer is, WHETHER IMPLIED OR BY OPERATION PARTICULAR PURPOSE. UNDER NO CIRC LER'S LIABILITY, IF ANY, SHALL BE LIMITE	this Agreement, or the bread SELLER MAKES NO EXPRESS OF LAW OR OTHERWISE, INCLI UMSTANCES, WILL SELLER BE	The thereof. ED OR IMPLIED WARRANTIES. UDING WITHOUT LIMITATION ALL LIABLE FOR INCIDENTAL,		
By signing this application, I ack	nowledge that I have read and ur	nderstand the terms of sale and agree	to abide by them.			
Name of Applicant:						
Signature of Authorized Represe	entative:					
Printed Name and Title:						



whether or not credit is granted.

Corporate Headquarters

3125 Cockrell Lane - Springfield IL 62711

Date

Phone: 217.793.4300

PERSONAL GUARANTY

Inc. ("Seller") to obtain such information as may be required concerning this application, and (3) agree that such information shall remain the property of Seller

The undersigned ("Guarantors") hereby (1) certify that the information given for the purpose of obtaining is true and correct, (2) authorize Capitol Group,

and Seller's extension of credit be unconditionally guarantee and po- collection, including any collection attorney for collection, including the unpaid account balance at the attention of the secount collection.	romise to pay immediately a on agency fees of the unpaid any post judgment attorney ne maximum rate allowed by	in the name of Applicant,	account, together with all of Seller's expenses of any portion of said account is placed with an also agrees that service charges shall accrue on
nonpayment, and any right they shall not be obligated, as a cond Guarantors; Seller may immedia Guarantors hereby irre arising out of or relating to this A	may have to require Seller to the exercise of its righted to the exercise of its righted proceed against any or evocably consent to the jurisgreement or the relationships.	nuing and irrevocable guaranty and indemnity. Guaranto make any presentment, protest, demand, or notice of the ghts under this Guaranty, to first exhaust its remedies all of the Guarantors and need not take any action agrediction of the Circuit Court of St. Louis County, Misson between Applicant and Capitol Group, Inc., and agrent of any litigation relating to or arising out of this Guarantee.	of any kind to Seller or to the undersigned. Seller against Applicant or against all of the ainst Applicant or the other Guarantors. uri or St. Louis City, Missouri for any action se that venue is proper for any such action in said
Principal #1 Name (Print or Type)	Social Security Number	Signature of Guarantor (No Corporate Title)	Date
Principal #2 Name (Print or Type)	Social Security Number	Signature of Guarantor (No Corporate Title)	Date
Principal #3 Name (Print or Type)	Social Security Number	Signature of Guarantor (No Corporate Title)	Date

Witness