



SEAGULL SELECT
 4005 ROYAL DRIVE, SUITE 400
 KENNESAW, GA 30144
 PHONE: 770/ 425-9727

**COMMERCIAL ACCOUNT
 SET UP AND AGREEMENT**

DATE: _____
 ACCOUNT MANAGER: _____
 PROSPECT # _____

Legal name _____ Phone () _____
 Trade Name (DBA) _____
 Address _____ P.O. BOX _____ City _____ State _____ ZIP Code _____
 Type: Corporation _____ Partnership _____ Proprietorship _____ LLC _____ Date Established _____
 If Corporation: Date Incorporated _____ State _____
 Registered Agent _____
 Are you a subsidiary of another corporation? YES _____ NO _____
 If yes: Name _____ Address _____
 Date Business Started _____ No. of employees _____
 State Tax Exempt No. _____ Attach Certificate _____

NAME OF OWNERS, PARTNERS, OR CORPORATE OFFICERS

Name	Address	Phone
_____ President/Owner/Partner	_____	() _____
_____ S.S. # _____ D.L. # _____ D.O.B. _____	_____	() _____
_____ Vice President/ Partner	_____	() _____
_____ S.S. # _____ D.L. # _____ D.O.B. _____	_____	() _____

BANKING:

1) Name _____ Acct. No. _____ Officer _____
 Address _____ Phone No. () _____ Do you have any outstanding loans? YES ___ NO ___

2) Name _____ Acct. No. _____ Officer _____
 Address _____ Phone No. () _____ Do you have any outstanding loans? YES ___ NO ___

CREDIT REFERENCES:

	Acct. #	Phone	Fax
1) _____	_____	() _____	() _____
2) _____	_____	() _____	() _____
3) _____	_____	() _____	() _____

Are purchase orders required? YES _____ NO _____

Credit limit requested _____ Will you submit a financial statement? YES _____ NO _____
 If yes, please send with application or mail ATTN: CREDIT MANAGER. It will be held confidentially.

Accounts payable officer or supervisor _____

Phone () _____ Email Address _____

1.

I, (WE) UNDERSTAND THAT THE INFORMATION FURNISHED TO YOU ON THIS APPLICATION FOR ACCOUNT IS FOR THE PURPOSE OF OBTAINING CREDIT FROM YOUR FIRM. I (WE) UNDERSTAND THAT YOUR FIRM MAY AT ANY TIME REFUSE TO GRANT CREDIT TO ME, US , EVEN THOUGH CREDIT IS INITIALLY GRANTED PURSUANT TO THIS APPLICATION. I AM (WE ARE) AUTHORIZED IN MY (OUR) CAPACITY TO BIND MY (OUR) FIRM FOR ANY AND ALL CREDIT WHICH YOU EXTEND TO US. IT IS FURTHER AGREED AND UNDERSTOOD THAT ALL THE ACCOUNTS OR MONIES DUE REDI-CARPET SALES OF GEORGIA, LLC. SHALL BE DUE AND PAYABLE AT P.O. BOX 971442 DALLAS, TX 75397 WITH IN THIRTY (30) DAYS OF INSTALLATION; THAT ALL PAST DUE ACCOUNTS, NOTES, OR JUDGEMENTS SHALL BEAR INTEREST FROM THE DATE THE INDEBTEDNESS IS FIRST INCURRED UNTIL PAID AT THE MAZIMUM RATE ALLOWED BY LAW. IF THE ACCOUNT OR NOTES ARE PLACED WITH A THIRD PARTY FOR COLLECTION, THEN THE DEBTOR AND HIS GUARANTORS, IF ANY ARE LIABLE FOR REASONABLE ATTORNEY’S FEES AND ALL REASONABLE COSTS INCURRED IN THE COLLECTION OF THE INDEBTEDNESS.

SIGNED BY _____ PRINT NAME _____
NAME OF FIRM _____ TITLE _____
EMAIL _____ TELEPHONE NUMBER _____

2.

IN CONSIDERATION OF CREDIT BEING EXTENDED TO THE ABOVE NAMED FIRM. I (WE, IF MORE THAN ONE PERSON IS EXECUTING THIS GUARANTY THEY WILL BE JOINTLY AND SEVERALLY LIABLE) PERSONALLY GUARANTEE ALL INDEBTEDBESS, INTERESTS, COSTS, AND ATTORNEY’S FEES, IN ANY, THAT MAY BECOME DUE. I (WE) FURTHER AGREE THAT THE LIABILITY HEREUNDER IS DIRECT AND PRIMARY. THERE IS NO OBLIGATION ON THE PART OF REDI-CARPET SALES OF GEORGIA, LLC. TO EXHAUST REMEDIES AGAINST THE ABOVE NAMED FIRM PRIOR TO ENFORCEMENT OF THE GUARANTY. THIS GUARANTY IS AN ABSOLUTE, COMPLETE AND CONTINUING GU, AND NO NOTICE OF INDEBTEDNESS MAY BE ARRANGED, EXTENDED, AND/OR RENEWED WITHOUT NOTICE TO THE GUARANTEE. I (WE) AGREE TO, WITHIN (10) DAYS FROM THE DATE OF DEMAND, PAY ANY AND ALL INDEBTEDNESS WHICH IS OWNED BY THE ABOVE NAMED FIRM TO REDI-CARPET SALES OF GEORGIA, LLC. PLUS ALL INTEREST, COSTS, AND ATTORNEY’S FEES, IF ANY, THAT ARE DUE AND OWING.

SIGNED BY _____ PRINT NAME/TITLE _____
ADDRESS _____ SS# _____
EMAIL ADDRESS _____ TELEPHONE NUMBER _____

