



New Account Form

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Company Name (as it should appear on invoices) _____ Federal ID Number (FIN) _____

Shipping Address _____ City / State / Zip _____

Billing Address _____ City / State / Zip _____

Phone Number _____ Fax Number _____ Mobile Number _____

Email Address _____ Date Company Started _____ Number of Employees _____

Company Ownership: Corporation Partnership Proprietorship LLC Parent Company: _____

Please list the officer, partners or owners

Name _____ Title _____ Social Security Number _____

Name _____ Title _____ Social Security Number _____

Sales Tax Exempt: No Yes (If yes, copy of exempt certificate is required to complete application)

Preferred Delivery type: Will Call Würth Truck Delivery Is a PO number required to order? No Yes

Würth Sales Representative Name: _____ How did you find out about us? _____

Please confirm your main type of business

<input type="checkbox"/> A - Residential, cabinets	<input type="checkbox"/> E - Closet & Storage	<input type="checkbox"/> I - Government / Public Service
<input type="checkbox"/> B - Commerical, cabinets	<input type="checkbox"/> F - Millwork	<input type="checkbox"/> J - Resale
<input type="checkbox"/> C - Countertop Fabricator	<input type="checkbox"/> G - Commerical Store Fixtures	<input type="checkbox"/> K - Contract Finishing
<input type="checkbox"/> D - Kitchen & Bath	<input type="checkbox"/> H - Furniture	

Type of Account: COD Net 30 If Net 30, requested credit limit amount (based on a monthly need) _____

Trade References - **NOT** required for COD account applications (no credit cards)

1. _____
Name of Business _____ Address _____

Phone _____ Fax Number _____ Account Number _____

2. _____
Name of Business _____ Address _____

Phone _____ Fax Number _____ Account Number _____

3. _____
Name of Business _____ Address _____

Phone _____ Fax Number _____ Account Number _____



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Accounts Payable Contact Information: _____
Name

Email Address Direct Phone Number

Please confirm who should receive the following information

Invoices / Credit Memos / Statements	
Name:	Email:
Title:	Fax Number:

Quotes / Order Acknowledgements	
Name:	Email:
Title:	Fax Number:

Monthly Email Promotions / New Products and Services	
Name:	Email 1:
Title:	Email 2:

PLEASE READ CAREFULLY

- The company whose name appears above and to whom an open account is extended are governed by the following:
- No shipments will be made to any account, on an open basis, that will cause an account to exceed the established line of credit (credit limit).
- A service charge of 1.5% per month (or the maximum amount allowable by law) will be charged on past due balances until the account is paid in full, including any outstanding Returned Checks that have not been resolved 30 days after being placed on your account.
- A returned check fee will be assessed on all checks returned from the bank. The fee will be based on the maximum allowable amount by law by state.
- Payments will be made in accordance with the terms so state on each invoice. Payments will be applied to the oldest open invoices unless otherwise specifically instructed by the customer.
- Credit policies, including terms and credit limit, are subject to change at the discretion of the credit department. Upon acceptance of this application, and the issuance of an open line of credit, the applicant agrees to abide by the credit policies of Wurth Wood Group.
- That in the event of non-payment or payment default and the institution of collection or legal proceedings, the person, firm, or corporation to whom an account was extended, agrees to bear the expense of all collection costs and legal proceedings, without limitation, plus a reasonable attorney's fees, and all associated court costs.
- In the event of legal proceedings, whether initiated by Wurth Wood Group, the applicant, or the guarantor, venue rests in the State where the Wurth Wood Group branch is located. The same parties agree to binding arbitration. This agreement shall be governed by and construed in accordance with the laws of the State where the Wurth Wood Group branch is located.
- That advance notice will be given to Wurth Wood Group, at the address indicated below, of any change in business structure (example: incorporation, changed ownership, etc.) and that without such notice, the original principals to whom an account was extended shall remain liable. Notice is to be given by certified or registered letter and acknowledged by return receipt. Written notice is also required for change of business address.
- That permission is granted, as evidenced by my (our) signatures below, for Wurth Wood Group or its agents to contact the references listed hereon, or any other source, for the purpose of obtaining credit information. That the creditor, bank, or lending institution contacted has my (our) permission to furnish Wurth Wood Group with any and all information requested.

Signature of Officer, Partner or Owner Title Date

Signature of Officer, Partner or Owner Title Date

PERSONAL GUARANTEE

For the value received, the undersigned does guarantee payment of all amounts advanced by Wurth Wood Group to the applicant on the "Account Application" on reserve or attached, and agrees to the stipulations above. If the applicant defaults in its payment of any such indebtedness, the undersigned shall also pay to Wurth Wood Group all reasonable attorney's fees, collection fees, court costs, without limitation. This is a continuing guarantee and shall remain in full force until the undersigned delivers to Wurth Wood Group, at the address indicated below, written notice revoking it as an indebtedness incurred subsequent to such delivery. Notice must be given by certified or registered letter and acknowledged by return receipt. Permission is granted, as evidenced by my (our) signatures below, for Wurth Wood Group to make whatever credit inquires it deems necessary in connection with the guarantee, and I (we) authorize and instruct any person or consumer reporting agency to compile and furnish any information it any have or obtain in response to such credit inquiries.

Guarantor Signature Home Address Witness Signature

Guarantor Printed Name City / State / Zip Witness Printed Name

Social Security Number Date Signed

Date of Birth

<p>SONDRA HEATH WURTH WOOD GROUP - BIRMINGHAM 1640 MIMS AVE. SW BIRMINGHAM, AL 35211 SHEATH@WURTHWOODGROUP.COM FAX: (205) 925-7612</p>
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