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APPLICATION FOR IN-STORE CREDIT

COMPANY INFORMATION

LEGAL NAME OF COMPANY: \_\_\_\_\_  
 DOING BUSINESS AS NAME: \_\_\_\_\_  
 PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_  
 BILLING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 SHIPPING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 TYPE OF COMPANY: \_\_\_ PROPRIETARY \_\_\_ PARTNERSHIP \_\_\_ FRANCHISE \_\_\_ CORPORATION \_\_\_ OTHER  
 # OF EMPLOYEES: \_\_\_\_\_ YEARS IN BUSINESS: \_\_\_\_\_ ANNUAL SALES: \_\_\_\_\_  
 TYPE OF BUSINESS: \_\_\_\_\_  
 FEDERAL TAX ID #: \_\_\_\_\_  
 EMAIL ADDRESS (ES): \_\_\_\_\_  
 WEBSITE ADDRESS: \_\_\_\_\_  
 CREDIT LIMIT REQUESTED: \$ \_\_\_\_\_ OPENING ORDER AMOUNT: \$ \_\_\_\_\_

OWNER INFORMATION

FULL LEGAL NAME (INCLUDING INITIALS): \_\_\_\_\_  
 TITLE: \_\_\_\_\_ SSN: \_\_\_\_\_  
 HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_  
 FULL LEGAL NAME (INCLUDING INITIALS): \_\_\_\_\_  
 TITLE: \_\_\_\_\_ SSN: \_\_\_\_\_  
 HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

BANKING INFORMATION

BANK NAME: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**PERSONAL GUARANTEE**

In consideration of creditor extending credit to customer, the undersigned personally and individually guarantee unconditionally full and prompt of past, present, and future obligations and terms due creditor from customer, and/or any successor in interest (corporation or non-corporate) to customer's business, hereby waiving notice of acceptance of this guaranty, notice of rendering services and/ or sale of goods provided customer by creditor and notice of default or change or extension of credit terms. The undersigned consent to any extension of time for payment and assert that this is a continuing guaranty of payment to creditor until revoked in writing. Any married individual's signatory to this application represents that any credit granted pursuant to the subject account is an obligation incurred in the interest of his or her marriage or family.

All partners or officers of customer should sign and be bound personally:

PRINT NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**TRADE CREDIT REFERENCES**

BUSINESS NAME: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_  
BILLING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_  
BILLING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_  
BILLING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

**TERMS AND CONDITIONS**

We hereby apply for credit and affirm financial responsibility, ability, and willingness to pay in accordance with published terms. The above information is warranted to be true and complete. We hereby authorize you to verify and collect information on us, including but not limited to bank references, trade credit references, consumer and/or commercial credit reports. We agree to pay a month finance charge of 2.00% per month or the maximum applicable state rate on all past due balances. We agree to pay all costs of collection and litigation on this account in accordance with the laws of the Creditor's state of incorporation. We agree that all decisions with respect to the extension or continuation of credit shall be in the sole discretion of the creditor.

AUTHORIZED SIGNATURE AND TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_  
AUTHORIZED SIGNATURE AND TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_