

Credit Application & Agreement

Applicant's Name (Individual) _____ Date _____

Company _____

Address _____

Business Information

Type of Business _____

Type of Ownership: Corporation Partnership Individual

Owners, Partners, or Officers

Name _____ Telephone _____

Address _____

E-Mail Address _____

Name _____ Telephone _____

Address _____

E-Mail Address _____

Name _____ Telephone _____

Address _____

E-Mail Address _____

No. of years in business _____

Financial and Credit Information

Bank Name _____ Account # _____

Bank Address _____

Bank Officer _____ Telephone _____

Bank Name _____ Account # _____

Bank Address _____

Bank Officer _____ Telephone _____

Credit Reference

Name _____ Telephone _____

Address _____ Account # _____

Name _____ Telephone _____

Address _____ Account # _____

Name _____ Telephone _____

Address _____ Account # _____

In making this application for credit, Customer authorizes Carolina Country to make an investigation to determine whether Carolina Country will extend credit, including checking with the banks, Szabo & Associates, and credit references listed above.

If credit is extended, Customer, in consideration thereof, agrees to pay each invoice within thirty days from the date billing after which date any unpaid invoice is Past Due, and Carolina Country, or its assigns, may charge interest at the rate of 18% per annum from the date of billing on any past due invoice. Customer understands that any invoice not paid within thirty days from date of billing may be placed in the hands of an attorney for collection. Customer agrees to pay all reasonable attorney's fees, expenses and court costs if this account or any invoice or any charge thereunder which is past due is placed in the hands of an attorney for collection or for any other action for enforcement thereof.

Customer certifies that all information on this form is correct and that Customer fully understands the credit terms and agrees to payment in accordance with credit terms.

Customer _____

Signed _____

Title _____

Contact: Jennifer Boedart Hoey
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