



135 Elm St. Waltham, MA 02453
 P. 781-647-7500 F. 781-894-8014

COMMERCIAL CREDIT APPLICATION AND AGREEMENT

THE FOLLOWING INFORMATION MUST BE COMPLETED IN FULL. ALL INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE

Please Circle One: Corporation Partnership Proprietorship Individual

COMPANY INFORMATION

Legal Company Name _____ Email _____
 Physical Address _____
 Mailing Address _____
 Telephone Number _____ Fax Number _____ In Business Since _____
 Type of Business _____ Duns # _____ Fed I.D. # _____
 State Registration _____ Accounts Payable Contact _____
 Tax Exempt (Circle) YES NO Tax Exempt # _____

PLEASE PROVIDE COPY OF TAX EXEMPT FORM

OFFICERS OR PRINCIPALS

President
 Name _____ SSN _____
 Address _____ City _____ State _____ Zip _____

Vice President
 Name _____ SSN _____
 Address _____ City _____ State _____ Zip _____

Secretary/Treasurer
 Name _____ SSN _____
 Address _____ City _____ State _____ Zip _____

BANK REFERENCE

Name _____
 Address _____ Street/P.O.Box _____ City _____ State _____ Zip _____
 Checking Account # _____ Other Account # _____
 Account Representative _____ Telephone _____

CREDIT REFERENCES

(With at least one year payment experience)

Firm Name	Address	City	State	Telephone
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

P.O.'s Required? _____ Credit Limit Requested _____ Terms Required _____
 I (WE) CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND WILL COMPLY WITH TERMS GRANTED.
 Applicant authorizes creditor to check the credit or applicant with any listed credit reference, bank, or and other party, including credit agencies.

AGREEMENT

IN CONSIDERATION FOR THE CREDIT TO BE EXTENDED, BUYER PROMISES TO PAY FOR ALL PURCHASES IN ACCORDANCE WITH THE TERMS OF SALE ESTABLISHED BY CREDITOR UPON CREDIT APPROVAL. UNLESS SPECIFIED OTHERWISE ALL BALANCES ARE DUE 30 DAYS FROM DATE OF INVOICE. A FINANCE CHARGE OF 1.5% PER MONTH WILL APPLY TO PAST DUE ACCOUNTS IN THE EVENT A COLLECTION PROCESS IS INITIATED, ALL EXPENSES, FEES, AGENCY CHARGES AND EXPENSES WILL BE ADDED TO THE ACCOUNT. APPLICANT AGREES TO INFORM CREDITOR OF ANY CHANGE IN FINANCIAL STATUS THAT MATERIALLY AFFECTS ABILITY TO PAY AS SCHEDULED. ATTACH SIGNED FINANCIAL STATEMENTS (OR TAX RETURN); PRIOR YEAR AND CURRENT

Signed _____ Signed _____

Title _____ Date _____ Title _____ Date _____

OFFICE USE ONLY

APPROVED BY _____

AMOUNT _____



Boston Bark Payment Policy

Customer Agreement

Please initial each bullet, acknowledging that you agree to the Boston Bark payment policy terms.

- _____ As a NET 30 customer, I agree to make a payment on or before the due date listed on the invoice(s).
- _____ Invoice(s) received at point of purchase is my ONLY invoice copy.
- _____ A statement, listing all open invoices, will be mailed to me at the end of every month.
- _____ Once an invoice(s) becomes **31 or more days past due**, 3 phone calls will be placed to my company. If there is no **response or payment** after the **third phone call**, my account will be placed on COD by the end of business that day.
- _____ After being placed on COD, I have 7 calendar days to respond and/or make payment or payment arrangements with Boston Bark's accounting department to avoid being sent to collections.

By signing this document, customer has acknowledged and agreed to comply with Boston Bark's payment policy. Please sign and return to Boston Bark, 135 Elm St., Waltham, MA 02453 as soon as possible.

Company Name

Customer Signature

Date



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GUARANTY OF PAYMENT

For fair and valuable consideration of **Boston Bark Corporation**, supplying goods, materials, and merchandise to "The Company" as named below, the personal guarantor does hereby jointly and severally guaranty to **Boston Bark Corporation**, full and prompt payment of any and all amounts which become overdue by The Company.

This personal guaranty is continuing and extends to any and all such indebtedness including those which arise under successive transactions which may either continue the indebtedness or renew it after it has been satisfied. The undersigned personal guarantor agrees to pay all interest, costs and expenses, including costs of collection and reasonable attorney's fees which may be incurred by **Boston Bark Corporation**, as a result of The Company's failure to pay. This agreement shall be construed under the laws of the Commonwealth of Massachusetts and the personal guarantor hereby submits to the jurisdiction of the Courts of the Commonwealth of Massachusetts. This liability shall be direct and not conditional or contingent upon the pursuit of **Boston Bark's** remedies against any other individual or entity.

"The Company Name: _____

Guarantor Print
Name: _____

Signature: _____
Street Address
(no P.O. Box): _____

Town / State / Zip: _____

Date: _____