



C. A. SCHROEDER, INC.

1318 FIRST STREET, SAN FERNANDO, CA 91340
(818) 365-9561 • (323) 875-2026 • Fax (818) 365-4923

Salesman _____
Contract _____

NEW ACCOUNT CREDIT APPLICATION AND AGREEMENT

FIRM NAME, TRADE STYLE, FAX, STREET ADDRESS, PHONE, CITY, STATE, ZIP CODE

FULL NAME OF OWNER OR OWNERS (OR AN AUTHORIZED OFFICER OF CORPORATION)

LIST HOME ADDRESSES & ZIP CODE FOR PARTNERSHIP OR INDIVIDUAL

PLEASE CHECK ONE, INDIVIDUAL, PARTNERSHIP, CORPORATION, HOME PHONE, SPOUSE'S NAME, CALIF. STATE SALES TAX NO., CHARGE TAX, DO NOT CHARGE TAX, TYPE OF BUSINESS, DATE STARTED

CONTRACTORS LICENSE NO. & CLASS

TRADE REFERENCES

Table with 4 columns: NAME, ADDRESS, PHONE, FAX

NAME OF BANK, PHONE, FAX

STREET ADDRESS

CITY, ACCT. NO.

"The undersigned represents that the information supplied above is true and correct, and that any changes to the foregoing information will be sent to C.A. Schroeder, Inc., immediately upon such change. Should C.A. Schroeder Inc. extend credit to the undersigned agrees to the following terms:

- a) All invoices will be promptly paid when due;
b) Any invoice not paid when due will be subject to a service charge of 1 1/2 % per month, but not to exceed the maximum rate permitted by law;
c) In the event of any default, the undersigned shall be responsible for all costs of collection, damages and expenses, including actual attorney's fees and costs, whether or not litigation is commenced;

d) Jurisdiction and venue of any action hereunder are hereby fixed in Los Angeles County, State of California.

The undersigned has read the above conditions and provisions of this Application and Agreement and upon execution hereof, the undersigned individual also personally guarantees payment to C.A. Schroeder Inc., its assignees, agents or successors-in-interests, any and all sums due and owing for the purchase of merchandise and/or services, or any other obligation created hereunder.

DATED, PRINT NAME, TITLE, BY, OWNER OR AUTHORIZED OFFICER