



"Your Complete Source for Retail Packaging"

1-800-624-6244

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Phone: 336-996-7251 • Fax: 336-996-0399

www.packagingsource.com

Date _____

- New
- Update

Name of Business _____
 Corporation LLC Partnership Sole Proprietorship
 Address _____
 City _____ State _____ Zip Code _____
 Business Phone _____ Fax # _____
 E-mail _____
 Billing Address _____

For Office Use Only	
<u>Account No.</u>	_____
<u>Credit Guideline</u>	_____
<u>Date</u>	_____
<u>Credit Code</u>	_____
<u>Initials</u>	_____

Complete this section only if business is Sole Proprietorship or Partnership

1. Name _____
 Home Address _____
 City _____ State _____ Zip Code _____
 Social Security # _____ Home Phone _____

2. Name _____
 Home Address _____
 City _____ State _____ Zip Code _____
 Social Security # _____ Home Phone _____

Complete this section only if business is Incorporated or LLC

OFFICERS

1. Name _____ Title _____
 2. Name _____ Title _____
 3. Name _____ Title _____

Sales Tax Exempt # _____ (Attach Certificate)

In Business Since _____ Type of Business _____ Federal I.D. # _____

If Subsidiary
 Name of Parent Co. _____
 Address _____

Trade References

Name _____
 Address _____
 Phone _____ Account # _____

Name _____
 Address _____
 Phone _____ Account # _____

Name _____
 Address _____
 Phone _____ Account # _____

Banking Checking Loans

Bank _____
 Address _____
 Account No. _____
 Phone _____

Officer or Manager Handling Account

THE PACKAGING SOURCE
CREDIT CARD AUTHORIZATION FORM

Do you desire to charge your purchase on your Credit Card? Yes ___ No ___

BY CHECKING YES ALL INVOICES WILL BE CHARGED TO YOUR CREDIT CARD

If yes, please complete the following:

Type of Card _____ Account # _____ Exp. Date _____
3 or 4 digit Security Code _____ Name on Card _____
Address of cardholder _____
City _____ State _____ Zip Code _____

This agreement provides for a credit sale to _____ of
merchandise for business use. (Name of your Company)

Authorized Card Users _____

Signature _____

Title _____

THE PACKAGING SOURCE

CREDIT AGREEMENT

1. The information furnished on this application is submitted for the purpose of obtaining credit, and I understand that this information will be relied on for the extension of credit. I hereby certify that the information is true, correct and complete.
2. The Packaging Source is authorized to investigate my company's credit record and report to the proper persons and bureaus the performance of this agreement.
3. Terms of sale will be set based on our review of available credit information.
4. The Packaging Source will furnish an invoice for any goods purchased on this account.
5. Customer agrees to pay ALL collection costs and/or Attorney Fees, including court costs, incurred in collection of all Past Due invoices and accounts.
6. Interest will be charged at the rate of 1 ½% per month (18% per annum) on Past Due balances over 30 days.

	Company Name
_____	_____
Date	By (Officer or Owner) Please Sign

	By (Officer or Owner) Please Print

The undersigned individual who is either a principal of the credit application or a sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

GUARANTY

For value received The Packaging Source extended credit to the applicant(s) shown, the Guarantor hereby warrants and unconditionally guarantees to The Packaging Source the full and prompt payment when due to all indebtedness, obligations, and liabilities of Customer to The Packaging Source, including finance charges applicable thereto, now existing to hereafter created or arising, even if such indebtedness is in excess of the credit line. Guarantor further agrees to pay all expenses including expense of court costs and attorney and/or collection service fees paid or incurred by The Packaging Source in endeavoring to collect such indebtedness or any part thereof or in enforcing this Guaranty.

This Guaranty shall be enforceable before or after proceeding against Customer, or simultaneously therewith, and without resort to any security.

The incorporation, merger, reorganization or sale of the Customer's business shall not operate as a termination of this guaranty, and the Guaranty shall continue as to credit extended to such other entity.

This Guaranty shall remain in full force and effect until The Packaging Source has received written notice of cancellation. Any such notice of cancellation shall not affect the obligation of the Guarantor to pay all sums when due by the Customer and /or Guarantor.

The Guaranty is enforceable against the undersigned Guarantor(s) weather or not the signatures are witnessed.

The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guarantee, hereby consents to and authorizes the use of a consumer credit report on the undersigned, by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

_____	_____	_____
Witness	Date	Guarantor