



KABCORP, INC.



Corporate Office • 8411 Glenwood Ave. • Raleigh, NC 27612 • Ph. 861-0728 • Fax 571-1953

CREDIT APPLICATION

Company: _____ Number of years in business: _____

Business address: _____ Amount of credit desired: _____

Mailing address: _____ PO # required? Yes No

City, State, Zip: _____ NC Contractors license #: _____

Phone #: _____ Fax #: _____ A/P contact: _____

Corporation Partnership Proprietorship **NOTE:** If tax exempt, sales tax certificate must be attached

Business also known as or doing business as: _____

PRINCIPALS OF BUSINESS: (List all stockholders, officers, partners, and other owners of business.)

TITLE: _____ TITLE: _____

Name: _____ Name: _____

Address: _____ Address: _____

Phone #: _____ Phone #: _____

Social Security Number: _____ Social Security Number: _____

TRADE REFERENCES (SUPPLIERS):

COMPANY NAME	ACCOUNT #	PHONE #	FAX #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BANK REFERENCES:

BANK NAME	ACCOUNT #	PHONE #	CONTACT PERSON
_____	_____	_____	_____
_____	_____	_____	_____

SPECIAL INSTRUCTIONS: A facsimile will be valid as an original.

- Personal Guarantee required for credit lines over \$25,000.
- Latest financial statement must be attached for credit lines in excess of \$40,000..
- Mail application to 8411 Glenwood Avenue, Raleigh, NC 27612 or fax to: 919-571-1953.

CREDIT APPLICATION

8411 Glenwood Ave., Raleigh, NC 27612 Ph. (919) 783-7100 108 E. Chatham St., Cary, NC 27511 Ph. (919) 467-6341



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All appliance open accounts are due the 10th of the month. All cabinet and tile accounts are due as stated in the purchase agreement. A 1½% monthly interest charge will be added to all past due accounts. I/we agree to pay on demand all costs of collection should any indeptedness not be paid when due, including reasonable attorneys' fees and expenses, whether suit be brought or not. The undersigned owner/officer/agent of the business entity listed below hereby acknowledges that the extension of credit pursuant to this application is conditioned upon the personal guarantee of the undersigned for the payment of depth incurred hereunder. I/we hereby authorize the release of credit information about our accounts and authorize a routine credit investigation.

COMPANY: _____

COMPANY: **KABCORP, INC.**

BY: _____
(PRINT NAME)

BY: _____
(APPLIANCE REPRESENTATIVE)

BY: _____
(AS AN INDIVIDUAL)

BY: _____
(CABINET REPRESENTATIVE)

BY: _____
(AS AN OFFICER)

BY: _____
(STONE & TILE REPRESENTATIVE)

DATE: _____

DATE: _____

PERSONAL GUARANTY OF PAYMENT

In consideration of Kabcorp, Inc. extending credit to _____, I/we jointly and severally as individuals, agree to abide by all terms of credit reflected on this application, and further personally guaranty payment of any and all obligations under this Agreement or otherwise which may be owed to Kabcorp, Inc., its successors and assigns. Furthermore, in consideration of the extension of credit by Kabcorp, Inc., I/we agree to pay on demand all costs of collection should any indeptedness not be paid when due, including reasonable attorneys' fees and expenses, whether suit be brought or not. I/we acknowledge that I/we will derive a substantial benefit from the extension of credit pursuant to this application, and my/our liabilities and obligations hereunder shall be binding on my/our successors and assigns. This Guaranty is a guaranty of payment and not of collection.

SIGNED:

(WITNESS)

(GUARANTOR)

(GUARANTOR)

(PRINT NAME)

(PRINT NAME)

(PRINT NAME)