

PHONE: 318-687-3330
FAX: 318-686-5159

Southern Components, Inc.

CREDIT APPLICATION

mwilliams@socomp.com
sjohnson@socomp.com

PURCHASER/APPLICANT _____ TEL. NO. _____ TAX ID # _____

PERSON REPRESENTING BUSINESS _____ FAX _____

BUSINESS ADDRESS _____ ZIP NO. _____

STREET CITY

PROPRIETORSHIP _____ PARTNERSHIP _____ CORPORATION _____ LLC _____ OTHER _____

IF CORPORATION, PARTNERSHIP, LLC, ETC. GIVE DATE OF ORGANIZATION _____ STATE OF ORGANIZATION _____

FULL NAMES OF OWNERS, PARTNERS AND/OR OFFICERS (FIRST, MIDDLE, LAST) ADDRESS DATE OF BIRTH SSN

BANK REFERENCE _____ NAME OF OFFICER & TELEPHONE # _____

BUSINESS REFERENCES: NAME PHONE & ADDRESS CITY

HOW LONG BUSINESS ESTABLISHED? _____ IS PURCHASE ORDER REQUIRED? _____

IS THIS A SUBSIDIARY OF ANOTHER CORPORATION WHICH WILL BE RESPONSIBLE FOR PAYMENT OF PURCHASES FROM SOUTHERN COMPONENTS, INC.?

IF SO, TO WHOM DO WE APPLY FOR CONFIRMATION?

COMPANY NAME: _____

NAME AND TITLE: _____

ADDRESS: _____

SOUTHERN COMPONENTS MERCHANDISE IS SOLD ON THE FOLLOWING TERMS:

Interest shall begin to accrue on all charges thirty days after the date of delivery, (date of completion if delivery delayed at purchasers request) at an annual percentage rate of 18% (periodic monthly rate 1.5%). If a purchase is not paid within 35 days of delivery date purchasers account will go on a C.O.D. basis until such time as SOUTHERN COMPONENTS, Inc. shall deem it advisable to reopen said account on regular credit terms. Purchaser hereby agrees to pay to SOUTHERN COMPONENTS, Inc. all indebtedness now or hereafter owing by purchaser to said company. Purchaser applies for credit and will abide by the terms and conditions of SOUTHERN COMPONENTS, Inc. The information furnished is accurate and complete to the best of our or my knowledge.

In the event this account is referred to an attorney for collection and/or suit, purchaser agrees to pay reasonable attorney's fees, which are hereby fixed at 25% of the amount to be collected. Venue for any action shall be proper in Caddo Parish, LA. Purchaser will require approximately \$ _____ on credit each month.

SIGNED _____ BY _____
(NAME OF BUSINESS) (NAME & TITLE)

IF APPLICANT IS A CORPORATION, LLC, PARTNERSHIP OR OTHER ENTITY PLEASE COMPLETE FOLLOWING:

In consideration of SOUTHERN COMPONENTS, Inc. extending credit to the above applicant, the undersigned does hereby individually and personally unconditionally guarantee to SOUTHERN COMPONENTS, Inc. or their assigns at Shreveport, Louisiana the payment of such sum or sums of money as may at any time hereafter become due to SOUTHERN COMPONENTS, Inc. from the said applicant for goods, wares, merchandise and services sold to the applicant. All guarantors shall be liable jointly, severally and in solido with applicant and with each other for all sums due.

If it becomes necessary to enforce this guaranty by suit, I agree to pay interest and attorney fees as allowed by law. Venue for any action to enforce this guaranty shall be proper in Caddo Parish, Louisiana.

WITNESS

(Individual Signature)

(Individual Signature)

DATE

(Individual Signature)