FasClampitt Paper Store

4531 Ayers Suite 312 Corpus Christi, Texas 78415-1418 (361) 855-8102



Return To: Fax: (361) 853-7776 E mail: fccorpus@clampitt.com

Credit Application and Purchase Agreement

Clampitt Paper requests the entire application to be filled out. Missing information can affect our ability to establish on open account or delay the process.

Thank You, Clampitt Credit Dept.

> CREDIT DEPARTMENT FAX 361-853-7776

FasClampi	TT PAPER STORE -	CORPUS CHRIST
ACCOUNT #		

SALES REP:

CREDIT LIMIT:

CREDIT APPROVED () DENIED () COD ()

RETURN FAX TO (361) 853-7776

RETORIVITAN TO (301) 033-1110				
NAME OF COMPANY DBA		DBA (IF APPLICABLE)		
BILLING ADDRESS		SHIP TO ADDRESS		
CITY, STATE, ZIP CODE	STATE, ZIP CODE CITY, STATE, ZIP CODE			
COMPANY PREMISES		BUYER NAME		
OWNLEA	SE			
TELEPHONE NO:	FAX NO:	YEARS IN BUSINESS	TYPE OF BUSINESS	
EMAIL ADDRESS		TYPE OF ACCOUNT DESIRED:	METHOD OF PAYMENT:	
		□ OPEN □ C.O.D.	□ CHECK □ CORP. CC □ OTHER	
PURCHASE ORDERS REQUIRED?		ESTIMATED MONTHLY PURCHASES		
□ YES □ NO				
FEDERAL TAX I.D. NO.	SALES TAX PERMIT NO.	A/P CONTACT	PHONE NO:	

OWNERSHIP

SOLE PROPRIETORSHIP		□ BRANCH LOCATION OF HOME OFFICE
	LIMITED LIABILITY PARTNERSHIP	
NAME OF PRINCIPALS & TITLE	HOME ADDRESS	SOCIAL SECURITY NO.

BANK REFERENCE

NAME OF BANK	TYPE OF ACCOUNT (S)
	🗆 CHECKING 🗆 SAVINGS 🗆 LOAN
ADDRESS	ACCOUNT NO.
CITY, STATE, ZIP CODE	NAME OF OFFICER OR CONTACT
DO YOU FACTOR YOUR ACCOUNTS RECEIVABLE?	IF YES, NAME OF FACTOR OR OTHER TELEPHONE NO.

MAJOR TRADE REFERENCES (IF PRINTER, FURNISH 2 PAPER SOURCES)

NAME OF SUPPLIER 1.	MAILING ADDRESS, CITY, STATE, ZIP CODE	FAX NO.	ACCT. NO.
2.			
3.			
4.			

D & B NUMBER_____ RATING_____

IS A FINANCIAL STATEMENT AVAILABLE? $\ \square$ YES $\ \square$ NO $\$ IF YES, PLEASE ATTACH COPY.

SALES TAX INFORMATION DIAXABLE DINON-TAXABLE (MUST ATTACH CERTIFICATE)

REASON CLAIMING EXEMPTION _____ (RESALE/EXEMPT)

PLEASE NOTE: WE MUST CHARGE SALES TAX ON ALL PURCHASES UNTIL WE RECEIVE A PROPERLY COMPLETED TAX CERTIFICATE.

PARTIES AGREE THAT ALL PURCHASES MADE ARE SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS AS WELL AS TO ANY TERMS AND CONDITIONS STATED ON THE INVOICES AND/OR DELIVERY TICKETS:

- 1. Buyer agrees to pay all bills in accordance with invoice terms and further understands that failure to pay within terms may result in suspension of credit availability.
- 2. The undersigned further understands and agrees that past due balances are subject to service charges at the rate of 1 ½% per month (18% per annum) or maximum permitted by law. In the event of default in payment, buyer shall be liable for all collection costs incurred by seller, included but not limited to collection agency fees, court costs, and reasonable attorney fees.
- 3. The undersigned buyer is obligated to pay for all goods purchased regardless of whether the buyer receives any payments due him for sale or installation of the goods. Invoices are not payable in installments, but are payable in full as stated in paragraph (1) above. Seller may apply payments at its sole discretion unless buyer clearly indicates how funds are to be applied.
- 4. The terms, conditions and covenants contained herein shall be governed and construed in accordance with the Laws of the State of Texas, and venue in any action herein may be laid in or transferred to Dallas, Dallas County, Texas, at the sole discretion of seller.
- 5. This application is covered by the Equal Credit Opportunity Act, its amendments and Regulation B. Business credit will not be denied because of age, marital status, sex, race, color, religion, or national origin.
- 6. Arbitration agreement: At the election of Clampitt Paper Company on written notice to all debtors and guarantors, the parties agree to resolve by binging arbitration all claims and disputes greater than \$5,000.00 arising from or relation to agreements and transactions, including the validity of this arbitration clause. The arbitration shall be conducted in Dallas, Dallas County, Texas. The arbitration shall be governed by the Commercial Arbitration Rules of the American Arbitration Association. If the election is made to arbitrate the proceeding, claims or disputes as to any and all dealings between Clampitt Paper Company and debtors and guarantors, the parties agree to accept service by certified mail, return receipt requested, through the United States Postal Service of the initial claim documents which begin an arbitration. Judgment upon the award may be entered in any court having competent jurisdiction. If suit is necessary to compel arbitration or to stay court proceedings because of mandatory arbitration, the party or parties not complying with this Arbitration Agreement shall pay al reasonable attorney's fees, court costs and expert witness fees incurred by the party successfully enforcing said Arbitration Agreement.
- 7. The undersigned buyer hereby certifies that the information given on this application is given for the purpose of obtaining business credit on open account terms, and the information given above is true and accurate. Buyer hereby authorizes seller to contact consumer and/or commercial reporting agencies and any or all of the references listed on this application. Buyer also authorizes all references listed to release any and all information pertinent to applicant's credit and financial responsibility to the Credit Department of Clampitt Paper Company. Buyer's signature attests financial responsibility, ability, and willingness to pay our invoices in accordance with the terms shown on the invoice.

FIRM NAME:	DATE:

SIGNATURE:_

TITLE:

Owner, Partner, or Authorized Agent

In consideration of credit extended to the above applicant the undersigned does hereby personally and unconditionally guarantee to Clampitt Paper Company or its assigns the payment of such sum or sums of money as is now or may hereafter become due from said applicant to Clampitt Paper Company or any affiliated, subsidiary, or related company. This guaranty shall not be impaired by any extension of time or forbearance granted to the applicant with respect to any credit now outstanding or hereafter extended to the applicant. I agree to pay interest and reasonable attorney's fees as allowed by law if it becomes necessary to enforce this guaranty by suit.

By:

_____ By:_____

Guarantor

Guarantor

The personal guarantee **<u>MUST</u>** be signed if a sole proprietor, partnership, or any non-corporate entity.

RETURN THIS COMPLETED APPLICATION TO FAX (361) 853-7776



TEXAS SALES AND USE TAX EXEMPTION CERTIFICATION

Name of purchaser, firm or agency	
	Dhama (Area and and sumbar)
Address (Street & number, P.O. Box or Route number)	Phone (Area code and number)
City, State, ZIP code	

I, the purchaser named above, claim an exem items described below or on the attached orde		s and use taxes (for the	e purchase of taxable
Seller:			
Street address:	City, Stat	e, ZIP code:	
Description of items to be purchased or on the attac	ched order or invoice:		
Purchaser claims this exemption for the following re	ason:		
I understand that I will be liable for payment of sales Tax Code: Limited Sales, Excise, and Use Tax Act; M Authorities; County Sales and Use Tax Act; County Provisions Relating to Hospital Districts, Emergency of 125,000 or less.	/unicipal Sales and Use Tax Ad Health Services Sales and Use	ct; Sales and Use Taxes fo e Tax; The Texas Health	or Special Purpose Taxing and Safety Code; Special
I understand that it is a criminal offense to give an exe will be used in a manner other than that expressed in from a Class C misdemeanor to a felony of the seco	this certificate and, depending		-
Purchaser	Title		Date
NOTE: This certificate cannot be is	ssued for the purchase, lease,	or rental of a motor vehic	le.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.



TEXAS SALES AND USE TAX RESALE CERTIFICATE

Name of purchaser, firm or agency	Phone (Area code and number)		
Address (Street & number, P.O. Box or Route number)			
Address (Street & humber, F.O. Box of Route humber)			
City, State, ZIP code			
Texas Sales or Use Tax Permit Number (or out-of-state retailer's registration number or date applied for Texas Permit – must contain 11 digits if from a Texas permit)			
(Mexican retailers must show their Federal Taxpayers Registry (RFC) number on the certificate and give a copy of their Mexican registration form to the seller.)			
I, the purchaser named above, claim the right to make a non-taxable purchase (f	or resale of the taxable items		

described below or on the attached order or invoice) f	rom:		
Seller:			
Street address:			
City, State, ZIP code:			
Description of items to be purchased on the attached order	or invoice:		
Description of the type of business activity generally engage	ed in or type of items normally sold by the purcha	ser:	
The taxable items described above, or on the attached order or invoice, will be resold, rented, or leased by me within the geographical limits of the United States of America, its territories and possessions, or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.			
I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.			
I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease, or rental and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.			
sign Purchaser	Title	Date	
here /			

This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.