

A.Boilard Sons Inc

476 Oak Street, P O Box 51065
Indian Orchard, Ma 01151
Tel: 413-543-4100 Fax: 413-543-3406

INDIVIDUAL

CREDIT APPLICATION AND AGREEMENT

All information must be complete for the application to be considered. If this business is a partnership, a separate application is required for each partner.

Credit Limit Desired _____					
Applicant's Name:			Trade Name:		
_____			_____		
Last Name	First Name	Middle initial			
_____			_____		
Address: _____			Social Security # _____		
_____			_____		
City: _____	State _____	Zip _____	Date of Birth _____		
_____			_____		
Home Telephone : _____		Mobile Phone _____	Do you own or rent these premises _____		
_____			_____		
Business Telephone: _____			How long at present address _____		
_____			_____		
Is this a sole proprietorship <input type="checkbox"/>			Partnership <input type="checkbox"/>		

INCOME INFORMATION

Place of employment: _____	Type of Business _____
Address: _____	Employment Position _____
No. of years employed: _____	Average monthly gross income: _____

Motor Vehicles Owned (make): _____	Title in name of: _____
Model _____	Purchase Price: _____
Year _____	Balance Owed: _____
Financed By: _____	

Real Estate Owned:	Parcel 1	Parcel 2
Address: _____	_____	_____
Title in name of : _____	_____	_____
Date Acquired: _____	_____	_____
Purchase price: _____	_____	_____
Amount of Original Mortgage: _____	_____	_____
Unpaid balance of mortgage: _____	_____	_____
Name of Mortgage holder: _____	_____	_____

Bank Accounts:			
Bank Name	Account #	Type of Account	Average Balance
_____	_____	_____	_____

Attorney's Name: _____ **Address:** _____

CREDIT REFERENCES: Please provide 4 references, at least 3 of which are trade references

Name:	Address:	Telephone	Bal Due
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever declared bankruptcy? _____
If so, state when and in which State _____
Are you the defendant in any legal proceedings? _____
Have you ever had a judgment rendered against you? _____

The applicant hereby understands that this is an application for a thirty day account. All charges are due and payable thirty days from the billing date in order to maintain your credit privileges. The applicant hereby agrees that all purchases shall be in accordance with and subject to your terms and conditions of sale as may be set forth in your sales orders, invoices and other documents from time to time. The applicant hereby agrees to pay all invoices in accordance with the terms stated on such invoices and further, to pay finance charges of 1-1/2% per month (annual percentage rate of 18% simple interest), or such other rate as may be set by you from time to time, on the outstanding balance of any invoice not paid from the preceding monthly billing period. However, if such finance charge has been deemed in excess of that allowed by law of any jurisdiction, then the applicant shall be responsible for payment of the highest finance charge allowed within that jurisdiction. All payments shall be applied first to unpaid finance charges and then to outstanding balances for goods purchased. In the event of default, debtor agrees to pay in addition to the outstanding indebtedness, all costs of collection including a reasonable attorney's fee. In as much as this is not a "revolving" charge account, I understand that no further charges can be made to the account until all delinquent balances have been paid.

In the event that payment with applicable interest is not made when due, the applicant agrees that A. Boilard Sons, Inc may apply the charge to (type of credit card) _____,
Credit card # _____ belonging to _____,
Which expires on _____.

These terms and conditions shall be construed under and governed by the laws of the Commonwealth of Massachusetts and/or applicable Federal Law or regulations. If any provision of these terms and conditions is in conflict with applicable law, that provision will be considered as amended or omitted as to conform with the law, and the validity of the remaining terms and conditions shall not be affected.

I authorize, A. Boilard Sons, Inc in connection with the establishment and maintenance of the credit applied for, to investigate my credit worthiness and capacity to obtain credit information from third parties necessary for a determination thereof.

I certify that the statements on this application form and on any additional page or pages accompanying this form are true and correct, and that no material information (favorable or unfavorable) known to me or specifically requested herein has been omitted. I have read the above and do hereby agree to abide by the terms and conditions as stated and those incorporated herein by reference should credit be extended to me.

In signing this agreement, I/we understand the terms listed above.

Signature Date

Home address

Signature Date

Home address

Persons Authorized to Charge : _____

For office use only:		
Approved By _____	Credit Limit _____	Date _____
Account # _____	Entered By: _____	
Denied _____	Letter Sent _____	