



2555 N.W. 75th Avenue, Miami, FL 33122

CREDIT APPLICATION

A signed facsimile of this application shall serve as an original.

	Company Name:					
	Address:					
	City:	State:	Zip Code:			
miormation	Mailing Address (if different):					
	City:	State:	Zip Code:			
	Phone Number: Fax:					
рашу	Mobile:	obile: Email				
	Service Email					
	Business Classification: Corpora	ntion □ S-Corp	poration LLC	Partnership □	Sole Proprietor □	
1 41	Federal ID #		Date Establ	ished: Mo/Yr		
	Percentage of Customer Base: _	% Res _	% Com	% New Cor	nst (Must Equal 100%)	
	Dade County Derm Permit is Required (Please attach copy of DERM Certificate, Other County please attach a copy of EPA License)					
	Do you require a P.O. # YES	□ NO □	Estimated Monthly (Credit Required: \$	3	
nces	Name:		Contact:			
References	Address:		Account #:			
R	Phone #		Fax #:			
	Checking □ Saving □	Loan				
	Name:		Account #:			
	Address		Phone:			
ences	City, State, Zip:		Fax #:			
Refer	Name:		Account #:			
redit	Address		Phone:			
Part 3. Credit References	City, State, Zip:		Fax #:			
Par	Name:		Account #:			
	Address		Phone:			
	City, State, Zip:		Fax #:			

The information provided in this application is given for the purpose of obtaining credit and it true and correct. AMI Distributors, Inc. d/b/a AM Distributors (hereinafter known as "AMD") is authorized to obtain background information about Customer and its officers, directors and any guarantors, from all available sources as AMD deems appropriate, including consumer credit reporting agencies and to use such information in its decision to extend credit to Customer.

Invoices issued will reflect terms of payment. Failure to pay within terms as stated on the invoice may result in the entire balance becoming due & payable. In the event it becomes necessary for AMD to retain counsel to collect on any invoice, the customer shall be responsible to pay in addition to the charges, attorney's fees and court costs.

Company Name					
Signature	Title	_ Date			
Signature	Title	_ Date			
I (We) for ourselves, our heirs, personal representatives, successors and assigns, respectfully hereinafter called "Guarantor" hereby agreed to: AMI Distributors, Inc. d/b/a AM Distributors					
its successors and assigns, (hereinafter known as "AMD") payment of the full amount including interest of any and all purchases, orders, advances, supplies to and all contractual indebtedness of and all acceptances and any other indebtedness or liability (whether primary or secondary) of:					
To AMI Distributors, Inc. d/b/a AM Distributors from time to time and at all times hereafter without limitation as to the amount, plus interest, court costs and reasonable attorney's fees. The obligations hereunder shall be continuing and irrevocable. Guarantor hereby consents to AMD from time to time extending the time for payment in whole or in part and hereby waive notice to obtaining consent from Guarantor.					
Notice by revocable. Guarantor hereby consents to AMD of the acceptance of this guaranty is hereby waived. No act or omission of any kind by revocable. Guarantor hereby consents to AMD shall affect or impair this guaranty and AMD shall have no duties to the Guarantors. Guarantors hereby agree that their obligations hereunder shall be absolute and primary and shall be complete and binding as to each Guarantor. Guarantors hereby agree that their obligations hereunder shall be absolute and primary and shall be complete and binding as to each Guarantor upon this guaranty being executed by such guarantor and subject to no conditions precedent or otherwise.					
Signature	Social Security #				
Print Name:	Date:				
Home Address:					
Phone: Mob	Mobile Phone:				
Salesperson FOR OFFICE	USE ONLY Account #				