

W.T. Standard Automotive & Collision

Commercial Credit Application

Phone 770-928-1907 Fax 1-855-387-0319

Monthly Credit Requested _____ Taxable (Yes/No) _____

- Proprietorship
 - Partnership
 - S Corporation
 - C Corporation
- State Of Incorporation _____ Year Of Incorporation _____

The following information is required to set up a charge account with Standard Fleet Services. An owner or an officer who can legally bind your company must sign this application.

Legal Business Name _____

Address _____

City _____ State _____ Zip Code _____

Owner/CEO/Officer _____ Telephone _____ Ext _____

Title _____ Years In This Position _____ Years With Company _____

Nat'l A/P Contact _____ Telephone _____ Ext _____

DBA (if different from above) _____

Address For Statements or Invoices (if different) _____

City _____ State _____ Zip Code _____

Local Manager/Officer _____ Telephone _____ Ext _____

Title _____ Years In This Position _____ Years With Company _____

Local A/P Contact _____ Telephone _____ Ext _____

Which Method of Credit Do You Wish To Establish?

- Statement** - A statement will be mailed to you at the first of the month, all invoices from the previous month will be due for payment on or before the 10th of the following month. If payment has not been received by the 15th, your account will be placed on C.O.D. If you are habitually late regarding payments, your credit privileges will be revoked.
- Payment by Invoice** - An invoice will be returned with your vehicle. This will be the only invoice you will receive. Payment should be made in full within thirty days of the invoice date. If invoice is not paid within forty-five days, your account will be placed on C.O.D. It is your sole responsibility to track and pay all invoices per this agreement. If you are habitually late regarding payments, your credit privileges will be revoked.

Any change in credit method is the sole responsibility of credit applicant and must be made by an owner or officer who can legally bind the company. All requests for such changes must be made in writing. We reserve the right to request additional information if such requests are made.

Initial _____ Date _____

Standard Fleet Services Commercial Credit Application (continued from page 1)

Does Your Company Require Purchase Orders?

Yes No

If yes, should repairs be held up until P.O. # is issued? Yes No Other _____

Name of Persons Who Can Authorize Repairs

It is the responsibility of your company to pay all invoices authorized by any of the above personnel. Any changes regarding who is authorized to approve repairs, must be provided in writing, and is the sole responsibility of your company.

Financial Institution

Name _____ **Office/Branch** _____

Telephone _____ **Officer** _____

Number of Years _____ **Account Number** _____

Local Trade References

These references are Required to be local and Must include companies with which you have at least one year of credit history

Name _____ **Contact** _____ **Phone** _____

Name _____ **Contact** _____ **Phone** _____

Name _____ **Contact** _____ **Phone** _____

In consideration for credit being extended, I or we acknowledge we have read and do agree with the terms and conditions stated on the above two pages and to the following: 1) Credit is a privilege extended by W. T. Standard to your company, 2) The terms of such privilege are established solely by W.T. Standard , 3) Payment is jointly, severally, and unconditionally guaranteed within the guidelines as set forth in this agreement, 4) Any charges still outstanding after ninety days from invoice date are subject to collection; all collection, arbitration expense, attorney's fees, and court costs will be borne by the purchaser, 5) A lien against the vehicle(s) on which the repairs were performed or any vehicle(s) owned by your company, shall be in effect and enforceable equal to the full amount of outstanding charges until all charges against these repairs are collected, 6) All claims, requests for adjustments, notification of errors, or dissatisfaction with any services performed must be made in writing within thirty days of the invoice date, or charges are considered accepted, 7) Credit privileges may be withdrawn at any time without invalidating the terms of this agreement.

Authorized

Signature _____ **Title** _____ **Date** _____

Authorized signature must be an owner or officer who can legally negotiate and sign contracts for your company. Someone representing your company in this capacity must sign credit application, or it will not be processed.

Credit Will Not Be Extended Until This Application Is Signed And Returned