

			Date:					
Name								
Street or P.O. Box Mailing Address			_ ☐ Corporation					
			☐ Partnership or Individual					
City State Zip			☐ Government, State, County, City, etc.					
PHONE NO. ()			Years in Business					
40	Name	S.S. No	n	I Title		% of Ownership		
			2.0					
PA	Home Address	City	y		State		Zip	
<u>S</u>	Name	S.S. No	 3. No.		Title		% of Ownership	
\leq								
PRINCIPALS	Home Address	City		State	State		Zip	
TRADE REFERENCES								
		Follow up for C Date Opened High			mpaı	ny use only Pay History		
					g		i dy i notory	
Name & Address			Tel. No.			4		
Name & Address			Tel. No.					
Name & Address			Tel. No.					
STATE SALES TAX								
Are You Tax Exempt? If y es, what is your tax number								
□ Yes □ No								
• For the purpose of securing credit from you, I/We Certify that the above information is true and complete to the best of my/our knowledge Applicant(s) further certify that I/We have attained the Age of Majority. Applicant(s) Authorize you to check my/our credit and employment history and to provide and/or obtain information about credit appearance with me/us.								
Applicant Signature Date								
 If account is authorized to purchase on open account, it is understood that all purchases are due and payable by tenth of month following date of purchase. 								
	are a private corporation, partnership or individual if applicable.	ual the fo	ollowing must be	signe	d by majority stock	hol	der, partner or	
In consideration of credit being extended to the above firm I personally guarantee all indebtedness hereunder. I further agree that this guaranty is an absolute, completed and continuing one and no notice of the indebtedness or any extension of credit already or hereafter contracted by or extended need be given. The terms may be re-arranged, extended and/or renewed without notice to me. That I will, within five days from date of notice that the account past due, pay the amount due.								
GUARANTOR'S SIGNATURE								
SUBSCRIBED AND SWORN TO BEFORE ME THIS			DAY OF				20	
	(SEAL)	NOTARY	<i>(</i>					

HELFMAN DODGE, INC 7720 KATY FREEWAY AT SILBER ROAD HOUSTON, TEXAS 77024 TEL: 713.533.6333 FAX: 713.533.6301