



Online at www.warehousewest.net

Credit Application and Agreement

909 Thomas Ave SW
 PO Box 299
 Renton, WA 98057

Toll Free 1 - 800 - 426 - 8967
 Local 206 - 772 - 1910
 Fax 425 - 226 - 3353

Business Name		Phone Number	Fax Number	Email Address
Address	Street	City	State	Zip Code

Type of Business _____ Name of Bank _____
 How long in Business _____ Branch _____
 Account Number _____
 Business Location _____ Owned / Leased / Rented _____ Resale Tax Number _____
 (Circle one of the above) (Please Include a COPY of WA State Reseller Permit)

Circle: Sole Proprietorship / Partnership (Only needed if business is a Partnership)

Name of Owner _____ Name of Partner _____
 Social Security # _____ Social Security # _____
 Home Address _____ Home Address _____
 Name of Spouse _____ Name of Spouse _____
 Home Phone _____ Home Phone _____

Corporation/LLC Incorporated in State of _____
 Corporate Address _____
 President _____ Home Phone _____ Social Security # _____
 Home Address _____

BUSINESS REFERENCES

Name	Address	City	State	Zip	Phone
1					
2					
3					
4					

ACCOUNT PREFERENCES & INFORMATION

Are you interested in online ordering? (Circle) Yes / No
 If so, we will contact you to set up a password

How would you like to receive your orders? (Circle) Will Call / UPS / Other

Do you have multiple shipping addresses? (Circle) Yes / No
 If so, we will contact you to set up additional shipping information

Do you require a P.O. Number for all purchases? (Circle) Yes / No

What is your preferred method of payment? (Circle) Charge Account / Credit Card on File / Cash, Check or COD

To pay with credit card on file, please provide card information here: Credit Card # _____ EXP _____

Who should we contact concerning your Accounts Payable? Name _____

Phone _____ Email _____

CREDIT AGREEMENT

In consideration of extension of credit by Warehouse West, the applicant agrees and warrants as follows:

1. Applicant warrants that any financial statement submitted as part of this application is true and correct and reflects the current financial condition of Applicant.
2. In the event Warehouse West chooses to extend credit, Applicant agrees to pay for each sale in full on or before the 25th day of the month following the date of purchase.
3. Unpaid account balances will, at the option of Warehouse West, bear interest at the rate of 1.5% per month.
4. The terms and conditions of this credit agreement shall be construed in accordance with the laws of the State of Washington. Venue for any suit brought to collect this account shall lie in King County, Washington.
5. If Applicant's account becomes delinquent, Applicant agrees to pay Warehouse West all fees and costs associated with the collection of the delinquent account, including, but not limited to, reasonable attorneys' fees and costs.
6. In the event Applicant files for bankruptcy or becomes the subject of any insolvency proceedings under federal or state law, Applicant agrees to pay creditor, its reasonable attorneys' fees and costs incurred in connection with such bankruptcy or insolvency proceeding.

Name of Business _____
Date _____ By _____
Authorized Signature of Applicant
Title _____

PERSONAL GUARANTY

The undersigned individual(s) (Guarantor) in consideration of the extension of credit to Applicant hereby individually agree to pay any and all indebtedness of Application to Warehouse West. It is understood that Warehouse West would not have provided credit to Applicant without this personal Guaranty.

Guarantors hereby authorize Warehouse West to obtain their personal credit reports to ascertain whether credit should be extended to Applicant.

Date _____ Guarantor _____
Address _____
Date _____ Guarantor _____
Address _____