



CUSTOM WHOLESALE FLOORS, INC.

2655 Dawin Road N.
 Jacksonville, FL 32207
 904-281-0303
 1-888-336-3015
 Fax: 904-281-0053

ACCOUNT NO. _____
APPROVED _____ C/L _____
DATE OPENED _____ TM # _____

COD APPLICATION AND PURCHASE AGREEMENT

BUSINESS NAME _____ TELEPHONE (____) _____

MAILING ADDRESS _____

SHIPPING ADDRESS _____

THIS BUSINESS BEGAN _____ GROSS ANNUAL SALES _____ THIS BUSINESS

IS A: SOLE PROPRIETORSHIP, PARTNERSHIP, CORPORATION, SUBSIDIARY OF _____
 THE OWNERS OR, IF CORPORATION, THE OFFICERS ARE:

TITLE	NAME	ADDRESS	FAX	TELEPHONE
1.	_____	_____	() _____	() _____
2.	_____	_____	() _____	() _____
3.	_____	_____	() _____	() _____
4.	_____	_____	() _____	() _____

PRESENT SUPPLIERS (preferably other flooring distributors) please furnish addresses.

NAME	ADDRESS	FAX	TELEPHONE
1.	_____	() _____	() _____
2.	_____	() _____	() _____
3.	_____	() _____	() _____
4.	_____	() _____	() _____

BANK NAME AND ADDRESS _____

ACCOUNT NUMBER _____ OFFICER TO CONTACT _____

- PARTIES HEREBY AGREE THAT ALL PURCHASES MADE ARE SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:
- The undersigned purchaser hereby agrees that all amounts due for goods and services purchased from CUSTOM WHOLESALE FLOORS, INC. are payable at 2655 Dawin Road N., Jacksonville, Florida 32207.
 - The undersigned purchaser agrees to pay, in the event the account becomes delinquent and is turned over to an attorney for collection, reasonable attorney's fees, plus all attendant collection costs and agrees that in the event that suit is filed venue will be in Duval County, Florida
 - The parties hereby acknowledge that the goods and/or services purchased from CUSTOM WHOLESALE FLOORS, INC., are not payable in installments, but are payable per invoice terms.
 - In consideration of CUSTOM WHOLESALE FLOORS, INC. extending credit, the undersigned does hereby agree individually, jointly and severally to pay for all goods, wares and merchandise supplied to any of us and/or the above named business. In the event it becomes necessary to place the account with an attorney for collection, we agree to pay all costs of collection including reasonable attorneys fees and hereby waive our privilege of being sued in the county of our residence and agree that if suit is brought, that venue will be in Duval County, Florida at the option of CUSTOM WHOLESALE FLOORS, INC.

We agree to immediately notify CUSTOM WHOLESALE FLOORS, INC, of any change in ownership or form of said business. This instrument shall remain in full force and effect until actual notice of revocation is received by CUSTOM WHOLESALE FLOORS, INC. by certified mail, Return receipt. By the signature below this will authorize CUSTOM WHOLESALE FLOORS, INC. to do a Personal credit check on the Principals of the above applicant.

WITNESSES :(must have two)

_____	President/Owner/Principal Corporately & Individually	_____	SS#
_____	President/Owner/Principal Corporately & Individually	_____	SS#

MIAMI * TAMPA * ORLANDO * JACKSONVILLE * ATLANTA