



Company Name _____

- Are you a licensed contractor? Yes No
- If yes, what is your license number? _____
- What type/class of license do you have? _____
- Is your license current/valid? _____
- How many employees work for your organization? _____

- Do you have a list of authorized users for this account? If yes, please list them here:

- Other than Hardwood flooring, what other products and services does your company offer?

- How often do you plan on purchasing product?

- Weekly
- Monthly
- Annually

- Please check one of the following:

_____ I have a floor covering store with a showroom. I sell all types of floor coverings.

_____ I have a hardwood flooring store with a showroom. I only sell hardwood floors

_____ I am a hardwood flooring contractor with no showroom

_____ Other - Please Explain _____



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 # _____

CREDIT APPLICATION AND PURCHASE AGREEMENT

ALL APPLICANTS REQUESTING CREDIT MUST FURNISH A CURRENT FINANCIAL STATEMENT

BUSINESS NAME _____ DBA (if applicable) _____

PHONE: () FAX: () CELL: () E-Mail: _____

MAILING ADDRESS _____ City _____ STATE _____ ZIP _____

SHIPPING ADDRESS _____ City _____ STATE _____ ZIP _____

THIS BUSINESS BEGAN _____ GROSS ANNUAL SALES _____ THIS BUSINESS IS A:

SOLE PROPRIETORSHIP, PARTNERSHIP, CORPORATION, SUBSIDIARY OF _____
 THE OWNERS OR, IF CORPORATION, THE OFFICERS ARE: FEDERAL TAX # _____

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

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

NAME	ADDRESS	TELEPHONE
1.	_____	() _____
2.	_____	() _____
3.	_____	() _____
4.	_____	() _____
5.	_____	() _____
6.	_____	() _____

MIAMI * TAMPA * ORLANDO * JACKSONVILLE * ATLANTA

Must sign Page 2 for this application to be complete



CUSTOM WHOLESale
FLOORS, INC.

BUSINESS
NAME _____ DBA (if applicable) _____

PHONE () _____

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 aver to an attorney for collection, reasonable attorney’s tees, 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. Buyer agrees to pay interest on any unpaid purchases, beginning 30 days after the payment due date, at the rate of 1.5% per month; 18% per annum, or the maximum judicial rate, whichever is less. Buyer also agrees to pay \$25 for each check issued by Buyer to CUSTOM WHOLESale FLOORS, INC., which is returned to CUSTOM WHOLESale FLOORS, INC., unpaid or marked NSF. 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 lees 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, INO, 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. Standard terms are 1%, 10 days, Net 30 days.

WITNESSES: (must have two)

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