



5801 East Taft Road
 North Syracuse, NY 13212
 P: 315.437.7617
 F: 315.703.6911
 1.800.GO.WYNIT
 www.wynit.com

Account Number (For Office Use Only)

Sales Rep

CREDIT APPLICATION/AGREEMENT FORM

LEGAL NAME OF APPLICANT(S): _____

TRADE NAME OF APPLICANT(S): _____ EIN or SSN: _____

OFFICERS/OWNERS NAME: _____ TITLE: _____

OFFICERS/OWNERS NAME: _____ TITLE: _____

MAILING ADDRESS: _____

TELEPHONE: (____) _____ FAX: (____) _____ WEBSITE: _____

DUN & BRADSTREET #: _____ DATE BUSINESS ESTABLISHED: _____

LENGTH OF TIME AT CURRENT ADDRESS: ____ ENTITY (Check One.) Corporation Limited Liability Co. Partnership Proprietorship

TERMS REQUESTED: NET TERMS CREDIT LIMIT _____ COD _____ PREPAID (WIRE TRANSFER, ACH) _____

SHIPPING ADDRESS: _____

A/P CONTACT: _____ E-MAIL ADDRESS: _____ PHONE #: _____

*** BANK, TRADE REFERENCES & CURRENT FINANCIAL STATEMENTS ARE REQUIRED FOR NET TERMS ***

BANK REFERENCES: (1) _____ (2) _____

FAX NUMBER: _____

PHONE NUMBER: _____

ACCOUNT NUMBERS: _____

BANK HOLDS SECURITY INTEREST? Yes ____ No ____ Yes ____ No ____

TRADE REFERENCES:

PLEASE FAX BACK TO: (315) 431-9535

NAME	CITY/STATE	TELEPHONE #	FAX #	ACCOUNT #

IN CONSIDERATION OF THE EXTENSION OF CREDIT BY WYNIT DISTRIBUTION LLC, APPLICANT AGREES TO THE FOLLOWING TERMS:

- The terms of payment are net 30 days.
- Current or year end financial statements will be supplied to WYNIT Distribution LLC upon request.
- In the event of default in payment, if the account is placed with an attorney or collection agency, applicant agrees to pay all the expenses and costs of collection to include reasonable attorneys fees.
- THIS AGREEMENT SHALL BE GOVERNED BY THE LAWS OF THE STATE OF NEW YORK AND APPLICANT CONSENTS TO THE JURISDICTION OF THE COURT OF THE STATE OF NEW YORK FOR ONONDAGA COUNTY OR ANY FEDERAL DISTRICT COURT HAVING JURISDICTION THEREIN FOR THE DETERMINATION OF ALL DISPUTES ARISING UNDER THIS AGREEMENT.
- Applicant authorizes WYNIT Distribution LLC, or any credit bureau or other investigative agency employed by WYNIT Distribution LLC, to investigate the references listed herein for verification and to thereafter obtain, from time to time, credit reports to evaluate its creditworthiness.

PRINT NAME: _____ DATE: _____

SIGNATURE: _____ TITLE: _____

Please fax credit application to: (315) 703-6911



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THE FOLLOWING SECTION MUST BE COMPLETED IF DEALER IS NOT INCORPORATED
PRINCIPAL (Owner/Partner) INFORMATION (Use separate sheet if necessary to list 100% ownership)
Individual who is either a principal of the credit applicant or a sole proprietor of the credit application, recognizing that his or her individual credit history may be used in the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit evaluation process. **A signature is required for individuals releasing their credit history.**

NAME OF OWNER, PARTNERS OR OFFICERS & TITLES:

NAMES: (1) _____ (2) _____

ADDRESSES: _____

SOCIAL SECURITY #: _____

TELEPHONE #: _____

PREVIOUSLY FILED BANKRUPTCY, DATES FILED: YES NO _____
Date filed Status

SIGNATURE (S) _____

IF THE APPLICANT IDENTIFIED IS A PARTNERSHIP, THE FOLLOWING PERSONAL GUARANTY MUST BE SIGNED BY ALL PARTNERS; IF A CORPORATION, IT MUST BE SIGNED BY AT LEAST TWO OFFICERS; IF A LIMITED LIABILITY COMPANY, IT MUST BE SIGNED BY THE MANAGER.

PERSONAL GUARANTY

As an inducement for WYNIT DISTRIBUTION LLC ("Creditor") to extend credit to the _____ hereof, and also in consideration therefore, the undersigned, hereby guaranty to the Creditor, absolutely and unconditionally, jointly and severally, the prompt payment of any indebtedness of the Applicant when due, without regard for the validity, regularity or enforceability thereof as to the Applicant.

The Guarantors agree to pay any finance charges which may accrue on the account of the Applicant and to reimburse the Creditor for all expenses (including costs of collection inclusive of reasonable attorneys fees and disbursements) incurred by the Creditor in connection with any indebtedness of the Applicant, the collection thereof, or the enforcement of this Personal Guaranty. The Guarantors waive notice of acceptance of this Personal Guaranty, the extensions of credit to the Applicant, demand for payment of the indebtedness of the Applicant, notice of default in payment by the Applicant, all other notices to which the Guarantors might otherwise be entitled, and any demand for payment under this Personal Guaranty.

This is a guaranty of payment and not of collection and the Guarantors further waive any right to require that action be brought against the Applicant or any other person. The Creditor shall have the right to discharge or release any one or more Guarantor from any obligation hereunder, in whole or in part, without in any way releasing, impairing or effecting their rights against any other the Guarantors.

No delay of failure on the part of the Creditor in exercising any rights hereunder shall operate as a waiver of the obligation of the Guarantors. No modification or waiver of the obligation of the Guarantors shall be effective unless in writing signed by an authorized officer of the Creditor. Any subsequent incorporation, merger, reorganization or sale of the Applicant's business shall not operate as to terminate this Guaranty which, together with the transactions incident thereto shall be governed by the laws of the State of New York. Guarantors consent to the jurisdiction of the Court of the State of New York, or any Federal District Court having jurisdiction in such County, for the determination of all disputes arising under Applicant's Credit Agreement and/or this guaranty.

Dated: _____

Guarantor Signatures: _____

Print Names: _____

Social Security Number: _____

Address: _____

Notary: _____

Please fax credit application to: (315) 703-6911