



UNITY GENERAL DISTRIBUTORS

"One stop shop for cabinet & flooring supplies"

2860 West 3rd Court * Hialeah, FL 33010
Ph #305-884-6700 * Fax #305-884-9995

3050 NW 60th Street - Ft.Lauderdale, FL 33010
Ph #954-973-2424 * Fax #954-973-2626

email: accounting@unitygeneral.com

CREDIT ACCOUNT APPLICATION

COMPANY NAME: _____	DATE: _____
Street: _____	
City: _____	State: _____
Phone#: _____	Fax#: _____
email _____	
Type of Company: CIRCLE ONE --- CORPORATION -- SOLE OWNERSHIP -- PARTNERSHIP	
Federal Identification # _____	
For Sales Tax Please Send State Form	
COMPANY PRINCIPALS:	POSITION or TITLE
NAME: _____	_____
NAME: _____	_____
NAME: _____	_____

TRADE REFERENCES:	
Name: _____	Phone# _____
Address: _____	Fax# _____
Name: _____	Phone# _____
Address: _____	Fax# _____
Name: _____	Phone# _____
Address: _____	Fax# _____
BANKING INFORMATION:	
Name: _____	Acct.# _____
Address: _____	

CONDITIONS OF SALE:

No claims or returns allowed on non-conforming items unless vendor is notified in writing via fax within 24 hours of receipts of the items. No credit will be allowed unless items are returned with vendor's prior written authorization. All returns must be in original box and packing. No returns will be allowed on any item specially manufactured or any item not maintained in vendor's regular inventory. Unless otherwise stated, charges made on open account are due in full within (10) days. Past due accounts will be charged 1 1/2% interest per month, including post-judgment interest. All expenses of collection, including reasonable attorney's fees, shall be an additional charge to the purchaser. Upon acceptance of the above the purchaser or its agent, as evidenced from his/her signature herein, the purchaser acknowledges these terms of sale. In the event litigation becomes necessary in regard to collection or any other dispute that may arise as result of the transaction, Miami-Dade County, Florida, will be the proper venue for such legal action.

Signature of Office/Owner/Partner: _____
(I certify the above information correct and true to the best of my knowledge)

Title: _____
Date: _____



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INDIVIDUAL PERSONAL GUARANTY

Company Name: _____

I, _____ [name], the _____ [title] of the applicant, for and in consideration of your extending credit at my request to the applicant (hereinafter referred to as the "Company"), hereby personal guarantee to you the payment of any and all obligations of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice thereof and consent to my modification or renewal of the credit agreement hereby guaranteed.

Signature: _____

Social Security #: _____

Date: _____