



**Recreation  
Supply Company**

**P.O. Box 2757  
Bismarck, ND 58502-2757  
Phone: (701) 222-4860 FAX: (701) 255-7895**

**CREDIT APPLICATION** Information is furnished for our confidential use only.

**Business Name** \_\_\_\_\_ **Credit Line Requested \$** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Shipping Address (if different)** \_\_\_\_\_ **For Past** \_\_\_\_\_ **Years** \_\_\_\_\_

**D/B/A** \_\_\_\_\_ **Federal Tax ID#** \_\_\_\_\_

**Brief Description of Business** \_\_\_\_\_

**Date Established** \_\_\_\_\_ **How long in business** \_\_\_\_\_

**Mortgage Holder/Landlord** \_\_\_\_\_

**Address** \_\_\_\_\_ **Phone #** \_\_\_\_\_

Business is a  Corporation  Partnership  Sole Proprietorship  Other (Specify) \_\_\_\_\_

**Please list Principals (Owners, Partners or Officers):**

**Name & Title of Principal** \_\_\_\_\_ **Residence Address (Street, City, State, ZIP)** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BANK REFERENCES:**

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_ **Acct #** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Checking** \_\_\_\_\_

**Saving** \_\_\_\_\_

**Loan** \_\_\_\_\_

**How is loan secured?** \_\_\_\_\_

**TRADE REFERENCES (Suppliers):**

Name	Phone Number	Address	City/State/Zip

**CREDIT APPLICATION, Page 2**

Has the firm or any of its principals ever been Bankrupt (circle)?      Yes      No

If Yes, explain \_\_\_\_\_

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (standard terms are Net 30 Days) and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Name of Business		
Print Name	Title	Signature



**PERSONAL GUARANTEE**

In consideration for Recreation Supply Company, Inc. extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to Recreation Supply Company, Inc. by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between Recreation Supply Company, Inc. and the customer. Recreation Supply Company, Inc. shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by Recreation Supply Company, Inc.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested, is received by Recreation Supply Company, Inc. Said notice shall specify the date on which this guaranty is to be terminated, said date not to be less then seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date	Name of person guaranteeing payment, NO TITLE
Home Address	
Home Phone Number	Social Security Number
Signature of person guaranteeing payment	Name of business whose account is guaranteed



**Credit Department Use Only**

Date: \_\_\_\_\_

Line of Credit    Approved / Denied      Amount: \$ \_\_\_\_\_

Comments: