



3055 Rte 940

Mt. Pocono, Pa 18344

Store# _____ Date _____ Gleco Paints, Inc.

info@glecopaint.com

Phone 570 839-2840 Fax 570 839-3500

76. Personal Credit Application

Thank you for your interest in our company's products and services. We appreciate your business and look forward to a long and prosperous business relationship.

Please complete the credit application and return it to the above address, attention Credit Department. Please note our credit terms. You will be advised shortly of your credit status with our company. Thank you. CREDIT APPLICATION

Personal Information:

Name* _____

Address* _____

City/Town* _____

State/Province * _____ ZIP * _____

Social Security Number* _____ - _____ - _____

Phone* (_____) _____ Ext _____ Fax (_____) _____

E-mail Address _____ Date of Birth* _____

Do you* ☐ Own ☐ Rent Monthly Housing Payment Amount \$ _____

Prior Addresses for the Last 5 Years:*All

Address _____ City State ZIP: _____

Address _____ City State ZIP: _____

Employment:

Employer _____

Address _____

Occupation _____

Contact to verify employment _____ Phone # (_____) _____

Length of Employment _____ Monthly Gross Salary _____

Do you require an additional Invoice? * Yes ___ No ___ If Yes, Email ___ Fax ___ Mail ___

Billing method Preferred? * Balance Forward statement ___ Open item statement _____

Credit References:*All

Bank Name _____ Account Number _____

City/Town _____

State/ Province _____ Phone (_____) _____ Ext _____

Credit Card Type _____ Number _____ Exp. Date _____

Credit Card Type _____ Number _____ Exp. Date _____

Trade or Supplier Credit References (Must provide at least 3)***All**

Name _____

Address _____

Person to Contact _____

City/Town _____

State/Province _____ ZIP _____

Phone (_____) _____ Ext _____ Fax (_____) _____

Name _____

Address _____

Person to Contact _____

City/Town _____

State/Province _____ ZIP _____

Phone (_____) _____ Ext _____ Fax (_____) _____

Name _____

Address _____

Person to Contact _____

City/Town _____

State/Province _____ ZIP _____

Phone (_____) _____ Ext _____ Fax (_____) _____

I certify that I am authorized to sign and submit this application for and on behalf of the applicant. I also certify that the foregoing information is true and correct to the best of my knowledge.

* _____

Name (Please Print or Type)

* _____

Date

Signature* _____

This text field will act as your signature in agreeing to the above waiver.

***Indicates that this info must be filled out**

78. Credit Terms Agreement

I, the "Applicant," hereby agree to the following credit terms agreement in connection with my application for credit terms from Gleco Paints, Inc. I, Applicant, agree as follows:

1. Applicant represents that the information supplied with the credit application and all associated documentation is in all respects complete, accurate, and truthful. Applicant agrees to notify Company promptly, in writing, of any substantive changes in the information Applicant has provided.
2. Applicant agrees to pay in full for goods and services rendered (without deduction or setoff) on or before the earlier of the 30th day of the month following the date of billing or the due date started on each billing to the order of Company. Any amounts not paid when due shall be assessed a service charge at the rate of 18% per year (1.5% per month) or the highest rate allowed by law.
3. If Applicant's account is placed or given to an attorney for collection, Applicant shall pay any and all expenses of collection and attempted collection, court costs, and reasonable attorney's fees in addition to other amounts due. The failure of Company to charge interest on Applicant's account or pursue any other remedy available to it shall not constitute Company's waiver of any rights.
4. The acceptance of this application by Company does not constitute an agreement to extend credit to Applicant or to provide services to Applicant. Company, in its absolute discretion, may set and/or modify credit limits from time to time or terminate credit, with or without notice to Applicant.
5. In the event Applicant or any affiliate of Applicant (i.e., a company or other entity under common control) defaults in the payment of any sums due to Company, all other amounts due from Applicant or any affiliate shall be immediately due and payable, including any amount due for freight in transit. Also, in the event of such default, to the extent allowed under applicable law, Company is hereby authorized by Applicant to take possession of any freight then being shipped by Applicant and hold the same until payment is made, with all the rights of a secured party under the Uniform Commercial Code, as applicable in the State of Company's headquarters.
6. Applicant agrees that Company may set off against monies due it from Applicant or any affiliate any monies owed by Company to Applicant or any affiliate. Applicant agrees that he/she will not set off against any amounts due Company or claimed to be due to Applicant from Company.
7. If any one or more of the above terms becomes invalid or illegal in any respect, such term or terms shall be waived and the validity, legality, and enforceability of the remaining terms shall not be affected.
8. All disputes related to underlying charges must be submitted to Company no later than 30 days following date of billing. Any billing not challenged within 60 days will be deemed accepted and it is agreed will not thereafter be subject to dispute by Applicant. Adjustments must be submitted to Company in writing. All adjustments must reference either an invoice number or an air waybill number, or both numbers, for which the adjustment is being made.

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3. If Applicant's account is placed or given to an attorney for collection, Applicant shall pay any and all expenses of collection and attempted collection, court costs, and reasonable attorney's fees in addition to other amounts due. The failure of Company to charge interest on Applicant's account or pursue any other remedy available to it shall not constitute Company's waiver of any rights.
4. The acceptance of this application by Company does not constitute an agreement to extend credit to Applicant or to provide services to Applicant. Company, in its absolute discretion, may set and/or modify credit limits from time to time or terminate credit, with or without notice to Applicant.
5. In the event Applicant or any affiliate of Applicant (i.e., a company or other entity under common control) defaults in the payment of any sums due to Company, all other amounts due from Applicant or any affiliate shall be immediately due and payable, including any amount due for freight in transit. Also, in the event of such default, to the extent allowed under applicable law, Company is hereby authorized by Applicant to take possession of any freight then being shipped by Applicant and hold the same until payment is made, with all the rights of a secured party under the Uniform Commercial Code, as applicable in the State of Company's headquarters.
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74. Authorization to Release Credit Information

8/13/2009

Thank you for your recent interest in establishing credit with our company. Please sign the authorization to release information agreement below and complete the enclosed form. Then send them to us with your filled out credit application. We will contact your credit and bank references. Then we will contact you regarding your credit terms with our company.

Thank you.

Credit Manager

Name or Company_____

Address_____

Address_____

City, State & Zip _____

We have recently applied for credit with Gleco Paints, Inc.

We have been requested to provide information for their use in reviewing our creditworthiness. Therefore, I authorize the investigation of me and my firm,
_____, and its related credit information.

The release in any manner of all information by you is authorized whether such information is of record or not.

I do hereby release all persons, agencies, firms, companies, etc. from any damages resulting from providing such information.

This authorization is valid for 30 days from the date of my signature below. Please keep a copy of my release request for your files. Thank you for your cooperation.

Signature _____ Date _____

This text field will act as your signature in
agreeing to the above waiver.