

Fax or	Email	to:
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Fax: 877-760-8112

Email: office@mycreativepaint.com

BILLING INF	ORM	ATION (Informa	tion in this	sectio	n is Manda	tory)							
BUSINESS NAME											INDIVIDUAL			
BILLING ADDRESS														
CITY			STATE	ZIP CODE	MAIN P	HONE NUMBER	AL	TERNATE PHONE NUMB	ER		PARTNERSHIP		TAXA	ABLE
FAX NUMBER			EMAIL ADDR	FSS						ļШ	CORPORATION			
							_				LLC			-TAXABLE
TYPE OF BUSINESS				YEARS IN BUSINES	S	# OF EMPLOYEES	CI	ONTRACTORS LICENSE N	0.		OTHER		(ATTA	CH CERTIFICATE OF EXEMPTION)
Complete thi	is Sect	tion if SOI	FIRST NAI					MIDDLE NAME			T LAST A DIGITS OF SSN	DRIVERS LICENSE		CTATE
LAST NAME			FIRST NAI	VIE				WIDDLE NAME			LAST 4 DIGITS OF SSN	DRIVERS LICENSE	NO.	STATE
HOME ADDRESS				(CITY		STATE				ZIP CODE	HOW LONG	S AT THIS	ADDRESS
PRIMARY PHONE NUMBER	R	4	ALTERNATE PH	ONE NUMBER		FAX NUMBER			EMAIL A	ADDRESS				
ARE YOU SELF-EMPLOYED EMPLOYED	N	NAME OF BUSINES	SS OR EMPLOY	ER		ADDRESS		CITY	1		S	TATE		ZIP CODE
ARE YOU BONDED?	11	F "YES", WITH WH	юм?			ADDRESS		CITY			S	TATE		ZIP CODE
SPOUSE LAST NAME	S	POUSE FIRST NAM	ИE				SPOL	ISE MIDDLE NAME			LAST 4 DIGITS OF SSN	DRIVERS LICENSE	NO.	STATE
NAME OF NEAREST RELATIVE	LAST NAM	ME F	FIRST NAME				PRIMARY P	HONE NUMBER		ALTERN	ATE PHONE NUMBER	RELATIONSHIP		
ADDRESS				(CITY				STATE				ZIP COD	E
Complete th	is Sect	tion if PAI	RTNERS	HIP, CORPO	RATIO	N or LLC								
FULL NAME of C	ORPO			ANAGERS, OF	FICERS	or PARTNER								
LAST NAME		FIRST NAI	ME				MIDDLE	NAME			LAST 4 DIGITS OF SSN	DRIVERS LICENSE	NO.	STATE
ADDRESS		CITY						STATE	ZIP COD	ÞΕ	FEDERAL TAX ID NO.			STATE INCORPORATED IN
BUSINESS PHONE NUMBER	R	HOME PH	IONE NUMBER		ALTERNATE	PHONE NUMBER		FAX NUMBER			EMAIL ADDRESS			
LAST NAME		FIRST NAI	ME				MIDDLE	NAME			LAST 4 DIGITS OF SSN	DRIVERS LICENSE	NO.	STATE
ADDRESS		CITY						STATE ZIP CODE			FEDERAL TAX ID NO.			STATE INCORPORATED IN
BUSINESS PHONE NUMBER	R	HOME PH	IONE NUMBER		ALTERNATE	PHONE NUMBER		FAX NUMBER			EMAIL ADDRESS			
BANK REFE	RENC	CES									•			
BUSINESS ACCOU	JNT													
BANK NAME / BRANCH #			ACCOUNT	NUMBER		PHONE NUMBER		ADDRESS			CITY	STATE		ZIP CODE
PERSONAL ACCO	UNT (CI	HECKING)												
BANK NAME / BRANCH #			ACCOUNT	NUMBER		PHONE NUMBER		ADDRESS			CITY	STATE		ZIP CODE
PERSONAL ACCO	UNT (SA	AVINGS)												
BANK NAME / BRANCH #			ACCOUNT	NUMBER		PHONE NUMBER		ADDRESS			CITY	STATE		ZIP CODE

ADVISION DESCRIPTION OF THE ADVISOR	TRADE REFERENCES / PRIMARY SUPPI	IFRS							
List Any Persons AUTHORIZED To Use Your Account Below:	·		JMBER	ADDRESS		CITY	STATE	ZIP CODE	
List Any Persons AUTHORIZED To Use Your Account Below:									
List Any Persons AUTHORIZED To Use Your Account Below: TAIL MORE	NAME	PHONE NO	JMBER	ADDRESS		CITY	STATE	ZIP CODE	
TALL MANS. CALL MANS. CALL	NAME	PHONE N	JMBER	ADDRESS		CITY	STATE	ZIP CODE	
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The information as set forth is furnished for the purpose of requesting My Paint Stop LLC dba Creative Paint (hereinafter called the COMPANY) to grant and extend me/us credit for the purchase of merchandise on your open account terms. The undersigned acknowledge that this account is for commercial purposes and not for personal, household, or family purposes.

The undersigned agree, jointly and severally, to pay any and all sums that may become payable under this account for merchandise sold to the applicant or to any person with apparent authority to utilize this account, unless notified to the contrary in writing by the applicant according to the credit terms of this COMPANY:

Payment terms are NET 30 end of following month from Date of Purchase.

All past due balances are subject to interest of 2% per month (24% annual percentage rate). The undersigned agree(s) to pay collection fees and/or attorney fees of 33-1/3% of the outstanding balance of this account, plus all costs of collection, including but not limited to court costs and all expenses (except where prohibited by law) in the event collection becomes necessary. The undersigned further agree(s) that any controversy or claim arising out of or relating to these credit terms or breach thereof shall be brought in the appropriate court.

The applicant, guarantors and others from time to time obligated under this account hereby jointly and severally waive and renounce the benefit of homestead and all other exemption rights as against this indebtedness or any renewal or extension hereof; and further waive demand, protest, notice of protest, presentment for payment, notice of dishonor and all defenses on the ground of extension of time for payment hereof (except where prohibited by law).

This credit application shall remain in full force and effect until the COMPANY shall have received written notice of instructions to create no further transactions under the terms and conditions of this credit application, a change in business ownership, or changes of any type. A certified mail receipt for such notification shall be conclusive evidence of the said receipt of such notice. Facsimile copy of this credit application will have the same force and full effect of the original document.

Note - the undersigned individual(s) who is/are either a principal, partner, or guarantor of the credit applicant(s), is/are a sole proprietor(s) of the credit applicant(s), is/are the sole member(s) of a limited liability company who is the credit applicant(s), or is/are an officer(s) or director(s) of the credit applicant(s), recognizes that his or her individual credit history may be a factor in the evaluation of the application for credit by the credit applicant(s) for credit with My Paint Stop LLC dba Creative Paint and hereby consents to and authorizes My Paint Stop LLC dba Creative Paint or its representative, obtaining and using a Consumer Credit report on the undersigned from time-to-time as may be needed in the credit evaluation process.