Dear Potential Customer,

Thank you for taking the time to fill out a dealer application. We look forward to a long and mutually prosperous relationship with you.

We request the following information to set-up an account with our company:

- Please fill-out the application completely. If you have a company information sheet you use to provide necessary information, please make sure that all the information we request on the application is provided on your company information sheet.

- Provide a copy of your Resale Certificate for Sales Tax and your current business license(s).

- Read the general Terms and Conditions carefully before signing. This area **must be signed** by the owner and/or partner of the business. Customers requesting to pay by credit card must fill-out and sign the credit card authorization form to be kept on file.

- After your application has been reviewed and/or your references contacted, you will receive an email from us indicating your approval or rejection for credit or dealer status with HI-PERFORMANCE DESIGNS, INC. We will also send you current product information and specific policies to follow in conducting business with our company.

Thank you again for your interest in doing business with us.

Sincerely,

Melissa Gaudens,
Administration

803 E. Reynolds Street, Plant City, FL 33563 813/707-9880 * melissa@hpdwheels.com
WWW.HPDWHEELS.COM

HI-PERFORMANCE DESIGNS, INC

CONFIDENTIAL CREDIT APPLICATION

COMPANY INFORMATION

COMPANY NAME:		
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***FAX:***	***EMAIL:***
FEDERAL ID #:	***RESALE TAX #:***	
BUSINESS TYPE:	***YEAR ESTABLISHED:***	***D & B #:***
OWNER / MGMT NAME:	***ACCOUNTS PAYABLE:***	
CREDIT AMOUNT REQUESTED:	***TERMS REQUESTED:***	

BUSINESS / TRADE REFERENCES

COMPANY NAME:		
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***FAX:***	***EMAIL:***
COMPANY NAME:		
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***FAX:***	***EMAIL:***
COMPANY NAME:		
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***FAX:***	***EMAIL:***

FINANCIAL REFERENCES

BANKING INSTITUTION:			
ADDRESS:			
CITY:		***STATE:***	***ZIP:***
PHONE:	***FAX:***		***CONTACT:***
CHECKING ACCT #:		***SAVINGS ACCT #:***	

BANKING INSTITUTION:			
ADDRESS:			
CITY:		***STATE:***	***ZIP:***
PHONE:	***FAX:***		***CONTACT:***
CHECKING ACCT #:		***SAVINGS ACCT #:***	

TERMS & CONDITIONS

- **All invoices are due for payment by the 10th day of the month following purchase and shall be considered overdue after this date. A 2% service charge (24% per annum) is added to statement balances 30 days past-due.**

- **In the event of default in the acceptance of goods or services ordered or in the payment for goods or services received applicant agrees to pay all costs and expenses, including reasonable attorney's fees incurred in remedying the default or the enforcement of any rights possessed by seller.**

- **I have answered to the best of my knowledge and understanding the terms of sale. Hi-Performance Designs, Inc. may inquire as to my credit standing.**

- **By submitting and signing this application, you authorize Hi-Performance Designs, Inc. and it's representatives or agents to make inquiries and obtain confidential account information from the banking, savings, government, business, and/or trade references you have supplied in this application.**

APPLICANTS SIGNATURE:	***TITLE:***	***DATE:***
CO-APPLICANTS SIGNATURE:	***TITLE:***	***DATE:***

THANK YOU!

HI-PERFORMANCE DESIGNS, INC

CREDIT REPORT CONSENT / AUTHORIZATION

KEY MANAGEMENT MEMBERS & OWNERS

NAME:	***TITLE:***	
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***SSN:***	
NAME:	***TITLE:***	
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***SSN:***	
NAME:	***TITLE:***	
ADDRESS:		
CITY:	***STATE:***	***ZIP:***
PHONE:	***SSN:***	

The undersigned individual who is either a principal of the credit applicant or a sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by Hi-Performance Designs, Inc. from time to time as may be needed, in the credit evaluation process. All persons listed in the Key Management Member and Owners section must read this paragraph and sign below.

AUTHORIZED SIGNATURE:	***TITLE:***	***DATE:***
AUTHORIZED SIGNATURE:	***TITLE:***	***DATE:***
AUTHORIZED SIGNATURE:	***TITLE:***	***DATE:***

HI-PERFORMANCE DESIGNS, INC

INDIVIDUAL GUARANTEE OF ACCOUNT

In cases of partnership and corporations, it is understood and agreed that the individual partners or officers will be personally liable for all purchases that are made.

In consideration of the extension of credit by *HI-PERFORMANCE DESIGNS, INC.* to:

_____located at:

_____.

The undersigned individuals do personally and individually guarantee payment of all charges together with interest at the legal rate from the due date of all charges on the account of the above named customer. The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guarantee, hereby consents to and authorizes the use of a consumer credit report on the undersigned, by *HI-PERFORMANCE DESIGNS, INC.* from time to time as may be needed, in the credit evaluation process.

Executed this _____day of _____, 20_____.

INDIVIDUAL GUARANTOR SIGNATURE:	***PRINT NAME:***
HOME ADDRESS:	
HOME PHONE:	***DATE:***
INDIVIDUAL GUARANTOR SIGNATURE:	***PRINT NAME:***
HOME ADDRESS:	
HOME PHONE:	***DATE:***

The Federal Equal Opportunity Act prohibits from creditors from discriminating against credit applicants on the basis of sex or marital status. The address of this Federal Agency is Federal Trade Commission, 1240 E. 9th Street, Cleveland, Ohio 44199.