



**PERKINS**  
OUR PEOPLE DELIVER MORE®

# PERKINS NEW ACCOUNT FORM

**PERKINS**  
630 John Hancock Road  
Taunton, MA 02780  
Tele. (508) 824-2800  
Fax (774) 226-1782  
www.perkins1.com

## SHIP TO:

\_\_\_\_\_  
Legal Name  
\_\_\_\_\_  
Business Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip  
\_\_\_\_\_  
Contact  
\_\_\_\_\_  
Phone No. (Area Code)      Fax No. (Area Code)

## BILL TO: (If Different)

\_\_\_\_\_  
Business Name  
\_\_\_\_\_  
Billing Address  
\_\_\_\_\_  
City, State, Zip  
\_\_\_\_\_  
Attention Of:  
\_\_\_\_\_  
Phone No. (Area Code)      Fax No. (Area Code)  
\_\_\_\_\_  
E-Mail Address

## ***BUSINESS INFORMATION:***

Proprietorship    Partnership    Corporation      Franchise of: \_\_\_\_\_  
(Under State of)  
Tax Exempt No: \_\_\_\_\_      Resale Certificate #: \_\_\_\_\_      Type of Business: \_\_\_\_\_  
New Owner?  Yes    No      Purchase Date: \_\_\_\_\_      Length of Time in Business: \_\_\_\_\_ (Years)  
Bldg./Facilities:  Owned    Leased    Rented      Customer Contact: \_\_\_\_\_  
REAL ESTATE OWNED BY:: \_\_\_\_\_

Complete the following information for all Corporate Officers, Partners, or an Individual Proprietor.

\_\_\_\_\_  
Name and Title  
\_\_\_\_\_  
Home Address  
\_\_\_\_\_  
City State Zip  
\_\_\_\_\_  
Home Phone No.

\_\_\_\_\_  
Name and Title  
\_\_\_\_\_  
Home Address  
\_\_\_\_\_  
City State Zip  
\_\_\_\_\_  
Home Phone No.

## ***ACCOUNTS RECEIVABLE INFORMATION:***

Accounts Payable Contact \_\_\_\_\_      Accounts Payable Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Is a statement required?  Yes    No      Purchase Order Number Required?  Yes    No

## **BANKING:**

\_\_\_\_\_  
Bank Name  
\_\_\_\_\_  
City, State, Zip      Telephone No:

\_\_\_\_\_  
Officer  
\_\_\_\_\_  
(Checking) Account No.

## ***TRADE REFERENCES:***

NAME	ADDRESS	PHONE NO.
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

# TERMS AGREEMENT

The undersigned ("Purchaser") agrees that all purchases made by Purchaser from Perkins or any of its subsidiaries and affiliated entities ("Seller") are subject to the following terms and conditions.

1. All information on this application is true and correct. Perkins is authorized to make such credit investigations as it sees fit, including contacting trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks and credit reporting agencies to disclose to Perkins any and all information concerning the financial and credit history of the applicant.
2. All amounts due for goods and services purchased from Seller are payable at the Seller's distribution facility as indicated on Seller's invoice. Purchaser acknowledges that such amounts are not payable in installments, but are payable in full as stated herein.
3. All amounts due Seller are payable in accordance with the payment terms granted by Seller's Credit Department from which the goods and services are delivered. If any amount due Seller is not paid in accordance with such payment terms, a delinquency charge shall be added to the sum due, which charge shall equal the amount obtained by multiplying the delinquent balance by the lesser of (a) one and one-half percent (1.5%) per month or (b) the maximum lawful rate permitted to be charged under the applicable state's law.
4. Purchaser shall pay Seller a bad check fee in the amount of \$25.00 for all checks returned unpaid by Purchaser's bank.
5. In the event the account is turned over to an attorney or other agency for collection, or suit is brought on same, or the same is collected through any judicial proceeding whatsoever, Purchaser shall pay all collection costs, reasonable attorneys' fees and court costs incurred by Seller.
6. Purchaser shall notify Seller by certified mail of any change of ownership of Purchaser. Purchaser warrants to Seller that all financial information furnished for the purpose of obtaining credit is true, correct and complete in all material respects, and Purchaser authorizes Seller to investigate all references furnished pertaining to the credit and financial responsibility of Purchaser.

## "PURCHASER"

\_\_\_\_\_  
(Business Name) Signature: \_\_\_\_\_  
Sales Representative of Seller Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_

## INDIVIDUAL PERSONAL GUARANTY

I/We, \_\_\_\_\_, for and in consideration of your extending credit at my request to \_\_\_\_\_ (the "Company"), personally guarantee prompt payment of any obligation of the Company to Perkins and each of its subsidiaries and affiliated entities ("Seller"), whether now existing or hereinafter incurred, and I/we further agree to pay on demand any sum which is due by the Company to Seller whenever the Company fails to pay same. It is understood that this guaranty shall be an absolute, continuing and irrevocable guaranty for such indebtedness of the Company.

I/We do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed, and to all renewals of extension of credit.

If the guaranteed indebtedness is not paid by me when due and this guaranty is turned over to a collection agency or to an attorney for collection, or suit is brought hereon, or it is enforced through any judicial proceeding whatsoever, I/we shall pay all collection costs, reasonable attorney's fees and court costs incurred by the Seller.

In the event more than one party executes this Guaranty as a guarantor, then each guarantor agrees to be jointly and severally liable for the guaranteed indebtedness, and, in all instances herein, the singular shall be construed to include the plural.

X \_\_\_\_\_ X \_\_\_\_\_  
Guarantor Guarantor  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Date: \_\_\_\_\_ Date: \_\_\_\_\_  
Witness: \_\_\_\_\_ Witness: \_\_\_\_\_

## TO BE COMPLETED BY SALES REPRESENTATIVE

### DELIVERY DATA:

Delivery Day: M T W T F Subs Allowed: Y or N Back Orders: Y or N Master #: \_\_\_\_\_  
Open for Receiving: \_\_\_\_\_ Close Time: \_\_\_\_\_ Priced Order Forms: Y or N  
Special Delivery Instructions: \_\_\_\_\_

Terms: \_\_\_\_\_ Credit Approval: \_\_\_\_\_  
Invoice Options: \_\_\_\_\_ Price Invoice with Delivery: \_\_\_\_\_ Unpriced Delivery Ticket (Invoice to Follow)  
Sales Rep. Name & #: \_\_\_\_\_ TM #1: \_\_\_\_\_ TM #2: \_\_\_\_\_

