

CREDIT APPLICATION AND AGREEMENT

118 Gando Drive • New Haven, CT 06513 P.O. Box 9494 • New Haven, CT 06534 (P) 203-772-2240 (F) 203-865-7827

	Date:	 	
Salesman Referred By:			
Salesman Kerenca by.		 	

COMPANY INFORMATION

Full Legal Name:		Date Business Opened: Number of Years in Business Under Current Management: If your business has been in operation for less than one year, please list prior experience: Has this company operated under another name? Yes No Have the current owners owned another company? Yes No If you checked yes to either question above, please list these companies:				
Company Name (DBA):		Number of Years in Business Under Current Management: If your business has been in operation for less than one year, please list prior experience: Has this company operated under another name?				
Billing Address:		Number of Years in Business Under Current Management: If your business has been in operation for less than one year, please list prior experience: Has this company operated under another name? Yes No				
Shipping Address:		Has this company operated under another name? ☐ Yes ☐ No				
		Have the current owners owned another company? ☐ Yes ☐ No				
		If you checked yes to either question above, please list these companies:				
Phone: Cell:						
Fax:						
Website:						

BOSINESS INFORM	VIATION						
Business is:	Are purchase orders required?	Check the appropriate box(es) if:					
(Check <u>one</u> .)	☐ Yes ☐ No	☐ You have ever declared bankruptcy ☐ A company in which you have owned has ever declared bankruptcy ☐ Any of the principals of this company have personally filed for bankruptcy ☐ Any previous companies owned by the principals have filed for bankruptcy ☐ You have any pending lawsuits against you or your company If you checked any of the boxes above, please provide a brief explanation:					
☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ LLC ☐ Other Type of business: (Check all that apply.) ☐ HVAC service	Are your purchases tax exempt? Yes No (If yes, please attach a copy of your completed tax exemption certificate.) Do you have a refrigeration license? Yes No (If yes, please attach a copy of						
☐ HVAC installation	your refrigeration license.)						
☐ Refrigeration ☐ Retailer ☐ Wholesaler ☐ Manufacturer ☐ Other Building is: ☐ Owned ☐ Rented	Types of materials you are interested in purchasing from The Star Supply Company: HVAC Residential Equipment HVAC Commercial Equipment HVAC Supplies	Estimated dollar value of anticipated monthly purchases from The Star Supply Company: \$ \$ \$	Purchasing Contact: Name: Phone: Email: Accounts Payable Contact: Name:				
Li Neilleu	☐ Refrigeration Supplies	\$	Phone: Email:				

PERSONAL INFORMATION

List below the full names, addresses, social security numbers, phone numbers, and email addresses of the principals, partners, officers, managing members, and/or the sole proprietor.

Name	Address	Social Security Nu	mber	Phone	Email			
				L	<u></u>			
RADE REFERENCI	<u>S</u>							
Company Name:			Phone	::				
Address:			Fax:					
City, State, Zip Code:			Email:					
Type of account:			Contact Name:					
Company Name:			Phone:					
Address:			Fax:					
City, State, Zip Code:			Email:					
Type of account:			Contact Name:					
Company Name:			Phone	::				
Street Address:			Fax:					
City, State, Zip Code:			Email:					
Type of account:			Contact Name:					
ADERI ESS RILLIN	G AND WEB ACCESS							
				gn up with a personal username on STAR-SUPPLY.COM to: hat apply.)				
☐ Statements to	☐ Submit or ☐ View Invo	ubmit orders □ Create bids □ View Account Info iew Invoices □ View Statements						
☐ Invoices to		Preferred Us	Preferred Username:					
		★ Please co	★ Please contact us for additional sign-ups.					
I am interested in making payments electronically:								

GUARANTEE

In order to induce THE STAR SUPPLY COMPANY (the "Beneficiary") to agree to extend credit to a commercial enterprise known as _____ (the "Obligor" a/k/a the Customer) and any and all other enterprise or enterprises owned and/or managed in whole or in part by the Guarantor ("additional Obligors") and the Beneficiary providing materials to the Obligor and/or additional Obligors pursuant to its and/or their purchases, which terms will include any and all amendments thereto and substitutions therefore hereafter made, regardless of whether they are made with or without the approval of the undersigned, and in consideration thereof, the undersigned hereby unconditionally and irrevocably personally guarantees payment and performance by the Obligor and/or additional Obligors, when due, of all of its and/or their obligations for

The obligations of the undersigned shall not be impaired, diminished or discharged by any extension of time granted by the Beneficiary, by any course of dealing between the Beneficiary and the Obligor and/or additional Obligors, by the unenforceability of any provision of the Credit Agreement for any reason whatsoever, or by any event or circumstance which might operate to discharge any other guarantor. The Beneficiary is hereby authorized by the undersigned to extend the time for payment or change the manner or terms of payment at any time and in such manner and upon such terms as the Beneficiary may see fit.

The undersigned agrees to pay on demand (a) any amount which the Beneficiary is required to pay under any bankruptcy, insolvency or other similar law on account of any amount received by the Beneficiary under or with respect to purchased materials or this Guarantee, and (b) all expenses of the collecting and enforcing this Guarantee including, without limitation, expenses and fees of legal counsel, court costs and the cost of appellate proceedings. The undersigned authorizes the Beneficiary to run a credit report for consideration of the credit agreement.

This Guarantee and the obligations of the undersigned shall be governed by and construed in accordance with the laws of the State of Connecticut.

This Guarantee is a guarantee of payment and performance and not of collection. The Beneficiary shall not be required to resort to or pursue any of its rights or remedies under or with respect to any other agreement or any other collateral before pursuing any of its rights or remedies under this Guarantee.

The failure or delay by the Beneficiary in exercising any of its rights hereunder in any instance shall not constitute a waiver thereof in that or any other instance. The Beneficiary may not waive any of its rights except by an instrument in writing signed by it.

This Guarantee may not be amended without the written approval of the Beneficiary.

This Guarantee will inure to the benefit of any assignee of the Credit Account.

purchases of materials.

GUARANTORS

Signature	Signature	
Printed Name	Printed Name	
Social Security Number	Social Security Number	
Address	Address	
Date	Date	

WITNESS

Signature	
Printed Name	

AGREEMENT AND COMMERCIAL WAIVER

The undersigned hereby represents that all of the above information is true, and makes said representations for the purpose of obtaining credit from The Star Supply Company. As part of this credit agreement, the undersigned hereby authorizes The Star Supply Company to contact commercial credit reporting agencies, bank and trade references listed or otherwise, to obtain information deemed necessary both before the extension of credit, and on a continuous basis to further evaluate the respective creditworthiness of the account.

The undersigned agrees to pay all bills for merchandise sold to it by The Star Supply Company according to the terms of sale of net 30 days, and for failure to do so agrees to pay all costs of collection, including a reasonable attorney's fee, together with interest on any unpaid balance at the rate of 1.5% per month (18% per annum), unless otherwise agreed upon in writing. Terms cannot be changed unless signed by an officer of The Star Supply Company. Terms of this agreement shall apply to all orders placed by person(s) employed by applicant, or representatives thereof. Applicant may submit a written list of authorized purchasers, if so desired, and changes may be submitted in writing at applicant's discretion.

To secure payment for all purchases from Secured Party, now and in the future, Debtor hereby grants Secured Party a continuing security interest in all of Debtor's presently owned or hereafter (a) goods, (b) instruments, (c) Chattel paper, (d) books and records, (e) accounts, (f) accounts receivable, (g) general intangibles, and (h) payment intangibles and together with all proceeds and all support obligations thereof. The following constitute Customer defaults: Non-payment in timely fashion of Customer's indebtedness to The Star Supply Company, bankruptcy, insolvency, or assignment for the benefit of creditors; misrepresentation in respect of any provision of this or any Agreement between The Star Supply Company and Customer. In the event of default, The Star Supply Company may declare all unpaid balances due. Customer authorizes Secured Party to file a financing statement describing the collateral.

The undersigned agrees to notify The Star Supply Company immediately in writing via certified mail of any change in ownership, address, or termination of any person(s) authorization to incur charges on the account on behalf of the company. Further, the undersigned agrees to indemnify and hold harmless The Star Supply Company of any loss incurred as a result of failure to provide such written notification as agreed above.

Company's credit application and guarantee constitute a commercial transaction and waive their respective right to a prior notice of and hearing under Connecticut General Statute sections 52-278a to 52-279g, inclusive, and hereby expressly agree that a prejudgment remedy may issue in favor of The Star Supply Company or its assignee and against the undersigned pursuant to C.G.S. Section 52-278f in the event of a default under the terms of The Star Supply Company's payment terms.

Should the undersigned fail to comply with all stated terms herein, or should credit worthiness or payment trend become deemed unsatisfactory, The Star Supply Company reserves the right to immediately restrict orders and terminate any previously granted credit terms on account.

Signature	Signature	
Printed Name	Printed Name	
Title	Title	
Date	Date	

WITNESS					
Signature					
Printed Name					

BANK AUTHORIZATION



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Date:	

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												7
	Signature											
	Printed Name											
	Company											
	Title											
	Date											
BANK IN	FORMATION											<u> </u>
Bank Nam	ne											
Bank Loca	ation											
Phone					F	Fax						
Name on	Account											
Account N	Number											
			Type of A	ccount: 🗆	Savings	□ Che	cking	□ Othe	er			

If you chose checking, please attach a voided check.