



# BEST CHOICE SUPPLY COMPANY

333 Midland Place Lexington, KY 40505  
(859) 255-4309 Fax (859) 255-4310

50 Slate Branch Rd Somerset, KY 42503  
(606) 425-4584 Fax (606) 425-4613

**(800-326-5755)**

www.bestchoicesupply.com

## APPLICATION FOR CONTRACTOR ACCOUNT

### COMPANY DETAILS:

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_ Fax \_\_\_\_\_

Type of Business \_\_\_\_\_ Start Date \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

Check one of the following:  Corporation  Partnership  Individual  LLC

### OFFICERS, PARTNERS, OR OWNER:

Title	Name	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you own or rent your building? \_\_\_\_\_ If rented, from whom? \_\_\_\_\_

Tax Exempt  YES  NO Please supply exemption certificate.

**Master HVAC License number:** \_\_\_\_\_

**EPA License Permit:** \_\_\_\_\_ (copy required for files)

**Federal Id #** \_\_\_\_\_

**IF THE APPLICANT REQUIRES A CHARGE ACCOUNT,  
PLEASE COMPLETE PAGE #2**

BCSC Sales representative: \_\_\_\_\_

**TRADE REFERENCES:**

Name	Address	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

**BANK INFORMATION:**

Name	Address	Account #
_____	_____	_____

Is a Financial Statement available?  YES  NO  
 Shipping tickets priced.  YES  NO

Terms of Sale: **10<sup>th</sup> prox.** Monthly service charges of 2% are billed for any balance not paid by the end of the first month following invoice date. An invoice is issued for each service charge that will be added to the monthly statement.

**Invoices** faxed or e-mailed:  FAX  E-Mail  
**Statements** faxed or e-mailed:  FAX  E-mail

Debtors Social Security No. is **required for partnership or Individual** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

The proceeding applicant information is for obtaining credit and warranted as the truth.  
 I / We authorize Best Choice Supply Company to contact the references listed and/or credit reporting agencies pertaining to my/our PERSONAL and BUSINESS history. If credit is approved I / We agree to abide by the terms of sale and return policy as previously listed.

\_\_\_\_\_  
 Signature Date Signature Date

**INDIVIDUAL PERSONAL GUARANTEE**

I/We, \_\_\_\_\_ residing at \_\_\_\_\_  
 for and in consideration of your extending credit at my / our request to the above named company, of which I / we are (title) \_\_\_\_\_, hereby personally guarantee payment to Best Choice Supply Company, for any obligation of the company, and I / we hereby agree to pay on demand any sum which may become due for charges made by the company, if the company fails to pay the same. I / We agree that the company is jointly and severally liable with anyone who may have signed a guarantee for any debt of the company to Best Choice Supply Company. We understand that this guarantee shall be a continuing and irrevocable guarantee and indemnity 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. This guarantee covers a maximum agreement liability of \$250,000.00 and will terminate on December 31, 2030 . I / We agree that should a lawsuit be necessary to collect any debt, I / we waive any objection to jurisdiction and/or venue if the suit is filed in Fayette County, Kentucky. If a suit is filed to collect this account, Best Choice Supply Company shall be entitled to collect all reasonable costs and expenses of suit, including, but not limited to, attorney's fees. I / We also agree to pay the monthly service charge of 2% on any balance not paid by the end of the first month following the date of the invoice noted on each monthly statement. This is the entire agreement between the parties. This guarantee can only be amended in writing signed by both the guarantor and a representative of Best Choice Supply Company.

\_\_\_\_\_  
 Signature Date Signature Date

**Approved by** \_\_\_\_\_

\_\_\_\_\_  
 BCSC Representative Date