

# CREDIT APPLICATION\*



Account #: \_\_\_\_\_

Salesperson: \_\_\_\_\_

Area: \_\_\_\_\_

Tax: \_\_\_\_\_

Office Use Only

## Main Office and Warehouse:

- New Brighton, MN 55112 - P.O. Box 120150 - 2050 Old Highway 8  
(651) 633-5020 - (800) 444-2657 - Fax: (651) 633-8723

## Branches:

- Bismarck, ND 58502 - 315 S. 22nd Street - (701) 222-7500 - (888) 217-9122
- Cedar Falls, IA 50613 - 5200 Nordic Drive, Suite A - (319) 553-0101 - (877) 626-3358
- Cedar Rapids, IA 52404 - 960 32nd Ave SW - (319) 298-8950 - (800) 445-6427
- Duluth, MN 55806 - 1910 West Michigan Street - (218) 740-4323 - (866) 444-4899
- Eagan, MN 55122 - 1975 Seneca Road, Suite 300 - (651) 452-7222
- Eau Claire, WI 54701 - 2050 Esmond Road - (715) 832-8922 - (800) 444-9457
- Fargo, ND 58102 - 4203 - 12th Ave NW - (701) 282-2692 - (800) 444-2857
- La Crosse, WI 54603 - 2008 Oak Street - (608) 881-7537 - (844)-400-6618
- Lincoln, NE 68521 - 2139 Cornhusker Hwy - (402) 438-6600 - (866) 940-6006
- Omaha, NE 68127 - 10206 "J" Street - (402) 331-3300 - (800) 366-4050
- Plymouth, MN 55447 - 2800 Vicksburg Lane North - (763) 559-7454
- Rapid City, SD 57702 - 1450 Samco Road - (605) 721-9519 - (866) 307-7917
- Rochester, MN 55904 - 1746 - 3rd Avenue SE - (507) 282-5072 - (800) 444-9757
- St. Cloud, MN 56303 - 4611 Rusan Street, Suite 2 - (320) 255-1590 - (800) 441-0557
- Sioux Falls, SD 57104 - 1509 C Avenue - (605) 332-7376 - (800) 919-0994
- Urbandale, IA 50322 - 10827 Prairie Dr, Suite A - (515) 270-7028 - (800) 337-1667

Please **check** the appropriate **location** of the  
Branch you will most likely visit, then:

**Fax:** (651) 604-6862, **E-mail:** darrell@hanksspec.com

or

**Mail to:** P.O. Box 120150, New Brighton, MN 55112

## \* PLEASE NOTE :

Hank's Specialties, Inc. is a wholesale supplier to the floor covering industry. If your primary business is not floor covering related, Hank's may not be able to furnish you with a credit account.

Phone #:

Name:

Date: \_\_\_\_\_

**CREDIT APPLICATION** *(Must be filled out completely)*

Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Shipping Address: *(if different from above)* \_\_\_\_\_

The capacity in which you will be doing business with us:  Individually  Corporation  Partnership  
 LLC  LLP  OTHER: \_\_\_\_\_

Firm's Full Legal Name *(if different from above)* \_\_\_\_\_

If a corporation, LLC or LLP, please state approx. date of formation: \_\_\_\_\_ Month \_\_\_\_\_ Year

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

Do you belong to a buying group? \_\_\_\_\_  
Have any of the companies or principals listed above ever been a debtor in a bankruptcy proceeding? \_\_\_\_\_  
Has any judgement ever been entered against any of the companies or principals listed above? \_\_\_\_\_  
Are there any legal actions or arbitration pending against any of the companies or principals listed above? \_\_\_\_\_

Type of Business \_\_\_\_\_ Yrs in Business \_\_\_\_\_ # Emp \_\_\_\_\_

Tax Exempt Number: \_\_\_\_\_ State \_\_\_\_\_ Tax Exempt  Yes  No  
( Sales and Use Tax Exempt #) Please Include copy of your State Tax Exempt Certificate.

Principal Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Contact Name: \_\_\_\_\_

TO WHOM IT MAY CONCERN, PLEASE CONSIDER MY SIGNATURE ABOVE AS WRITTEN PERMISSION FOR YOU TO RELEASE TO HANK'S SPECIALTIES SUCH INFORMATION AS IS NECESSARY FOR THEM TO EXTEND THE ABOVE NAMED FIRM OR INDIVIDUAL A COMMERCIAL LINE OF CREDIT.

Type of Accounts:  Checking; Account # \_\_\_\_\_  
 Savings; Account # \_\_\_\_\_  
 Loan; Loan Officer's Name \_\_\_\_\_

**CREDIT REFERENCES: (Open Accounts Only)** *To ensure faster response, please include the Fax number of the reference provided*

Firm Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**ADDITIONAL CREDIT REFERENCES:**

**Firm Name:** \_\_\_\_\_

**Phone # :** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_

**Phone # :** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_

**Phone # :** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

I/we warrant the information shown in the application to be true and authorize Hank's Specialties. I/we authorize Seller from time to time to obtain Business and Consumer Credit Reports on Customer or any principals listed above or to obtain credit and funding information for any other source.

I/we agree to notify in writing of any change in the capacity in which I/we do business, i.e., individual, partnership, corporation, LLC or LLP. Until such notice is given, Hank's Specialties may presume that I/we still do business in the capacity that I/we set forth in this application and all contracts entered into prior to any receipt of change, shall be binding upon me/us in such capacity. Further, I/we understand and agree that I/we shall have the burden of proving if and when such notice received.

I/we also agree to pay a service charge of 18% per year (equaling 1 1/2% per month) on the accrued, unpaid balance of any bill which is not paid in full within thirty (30) days. The service charge will be applied to the outstanding balance at the end of each monthly billing cycle. There is a minimum service of \$2.00 per month if any bill has not been paid in full within thirty (days). Hank's Specialties may modify the percentage of interest charged from time to time up to the highest amount allowed by law, and I/we agree to pay assessed interest as modified up to the highest legal amount.

If my/our account must be placed with an attorney for collection, whether a lawsuit is filed or otherwise, or if the services of an attorney are required to protect our interest, I/we do agree to pay all collection costs, including reasonable attorney's fees. "Reasonable attorney's fees" include, but are not limited to, 33 1/3% of the outstanding balance of principal and accrued interest.

Customer expressly agrees to submit to personal jurisdiction in Minnesota and agrees that the forum for any litigation pursuant to this Agreement or any other contract between Seller and Customer, whether Seller or Customer brings suit, shall be the County of Ramsey, Minnesota. This Agreement shall be governed by and construed in accordance with the laws of Minnesota.

**Date:** \_\_\_\_\_

**Amount of Credit Requested \$** \_\_\_\_\_

**Authorized Person:** \_\_\_\_\_ **Authorized Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Social Security #:** \_\_\_\_\_

**Person in charge of Accounts Payable:** \_\_\_\_\_

**Daytime Phone #:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Hank's Terms: 2% 10 days; net 30 days**

**CREDIT APPLICATION NOT ACCEPTED  
WITHOUT APPROVAL OF SELLER'S CREDIT DEPARTMENT**

**TO BE COMPLETED BY ALL CUSTOMERS APPLYING AS A CORPORATION, LLC OR LLP, IF SUCH CORPORATION, LLC OR LLP HAS BEEN FORMED WITHIN THE LAST THREE (3) YEARS.**

**PERSONAL GUARANTY**

In consideration of HANK'S SPECIALTIES, hereinafter called the seller, supplying goods and services for and on behalf of, or at the request of \_\_\_\_\_  
(name of corporation, LLC or LLP)

whose address is \_\_\_\_\_

hereinafter called the buyer, the undersigned jointly and severally hereby personally guarantee to the seller the payment of any sums now owing and all sums to become due the seller thereafter for goods and services provided or performed for said buyer or at the request of the buyer, said sums shall include accrued interest, collection costs and reasonable attorney's fees, if any, whether said sums are owing or become due under contract or an open account, and the undersigned waives demand for payment and notice or non-performance and non-payment.

It is expressly understood by all the parties hereto that if HANK'S SPECIALTIES extends credit to the above named buyer, it does so in reliance upon this guaranty as well as the present financial strength of the buyer.

**Dated:** \_\_\_\_\_

**Names:** \_\_\_\_\_  
(print) (signature)  
\_\_\_\_\_  
(print) (signature)

NOTE: Signature of owners required above