

Coast Auto Supply Co.

Warehouse Distributor Since 1935

125 SE Stark St. Portland, Oregon 97214

Phone: (503) 231-7797 Wats (800) 452-8752 Fax (503) 231-0501

APPLICATION FOR CREDIT

Firm Name: _____ Telephone: _____ Fax: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Billing Address: _____ City: _____ State: _____ Zip Code: _____

Type of Business: _____ Established: _____

Person Responsible for Accounts Payable: _____

() Corporation/Date Incorporated: _____ () Partnership () Sole Proprietor

PLEASE LIST THE FOLLOWING INFORMATION FOR, PARTNERS, CORPORATE OFFICERS, SOLE PROPRIETORSHIP

Name: _____ Title: _____ Home Phone _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Birthdate: _____ Social Security Number: _____

Name: _____ Title: _____ Home Phone _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Birthdate: _____ Social Security Number: _____

Name: _____ Title: _____ Home Phone _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Birthdate: _____ Social Security Number: _____

PLEASE LIST THREE MAJOR TRADE REFERENCES

<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Bank: _____ Branch: _____ Telephone: _____

Location: _____ Bank's Rep.: _____ Account #: _____

PAYMENT TERMS, FINANCE CHARGE INFORMATION AND AGREEMENT

I promise to pay my monthly purchases from Coast Auto Supply Inc. on the 10th of each following month. I further assume responsibility for all bills contracted in my name at the above address, and designate the following named persons as authorized purchasing agents of the undersigned until written notice to the contrary is given.

Name: _____ Name: _____

In the event it becomes necessary for Coast Auto Supply Inc. to incur collection costs or institute suit to collect under this agreement, or any section thereof, the undersigned promises to pay such additional collection costs and such sum as the Court may adjudge reasonable as attorney's fees in said suit. We further agree to a service charge of 1-1/2% per month, 18% annual, on accounts past due.

Firm: _____ Federal I.D. Number: _____

Signature: _____ Date: _____ Title: _____

FOR BANK CREDIT INQUIRY

I authorize Coast Auto Supply Inc. to make whatever inquiries it considers necessary and appropriate concerning such information: to give information regarding our Bank Credit experience: and I authorize said references to provide such information.

Applicant's Signature: _____ Date: _____

Corporation officers, partners or proprietors herewith acknowledge and assume personal responsibility for debts incurred in the name of the firm. The consideration for this guarantee is the continued extension of credit to the firm by this creditor.

Individual: _____ Date: _____