



# CREDIT APPLICATION

J. Thomas Distributors, LLC  
43500 Gen-Mar • Novi, MI 48375  
Phone: (800) 828-7980 or (248) 412-2180  
Fax: (800) 422-4184 or (248) 449-1735

Terms: Net 30 Days

PLEASE TYPE OR PRINT CLEARLY

Company Name: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Shipping Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## OWNERS AND/OR PRINCIPAL OFFICERS (THE FOLLOWING PERSON IS REQUIRED TO SIGN BELOW)

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Social Security No.: \_\_\_\_\_ Drivers License No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## CREDIT REFERENCES - TRADE ACCOUNTS (PLEASE SUPPLY PHONE AND FAX NUMBERS)

1) Company Name: _____ Phone: _____ Fax: _____ Email: _____	2) Company Name: _____ Phone: _____ Fax: _____ Email: _____
3) Company Name: _____ Phone: _____ Fax: _____ Email: _____	4) Company Name: _____ Phone: _____ Fax: _____ Email: _____

## GENERAL INFORMATION

Principal Line of Business: \_\_\_\_\_ No. of Years at Above Address: \_\_\_\_\_  
Former Address: \_\_\_\_\_  
No. of Years Established: \_\_\_\_\_ No. of Employees: \_\_\_\_\_ If Not Original Owner, Date of Business Purchase: \_\_\_\_\_  
Authorized Buyer's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Desired Line of Credit: \_\_\_\_\_ Accounts Payable Contact & Phone Number: \_\_\_\_\_  
Please State All Names You Have Done Business Under in the Past Seven (7) Years: \_\_\_\_\_

Are any suits pending or judgements outstanding for you or your company?  Yes  No  
Have you or any company you possessed a controlling interest in, ever declared bankruptcy in the last seven years?  Yes  No  
When and where was the bankruptcy filed? \_\_\_\_\_

## TERMS AND CONDITIONS

All credit extended under this agreement shall be deemed to have been given in Michigan and all disputes arising out of this agreement shall be governed by Michigan Law. The parties hereto expressly agree to personal jurisdiction, venue and subject matter jurisdiction in the City of Novi, County of Oakland, State of Michigan, regarding any and all matters relating to the extension of credit, payment of invoices or disputes over merchandise. Each paragraph of application hereunder shall be distinct and severable in the event any provision is held illegal, invalid or unenforceable. The undersigned personally guarantees payment of all sums due, which arise out of the purchase of merchandise on account and hereby waives notice of any modification, amendment or extension of credit thereof. I agree to pay a 1.5% monthly finance charge on any invoices past due and any related collection fees. I verify the above information and authorize a complete credit check.

\_\_\_\_\_  
Signature of Above Stated Owner and/or Principal Officer (An Individual)

\_\_\_\_\_  
Date