

**NEW ACCOUNT APPLICATION**

(All information must be complete to process application, PLEASE PRINT LEGIBLY)

Company Name: \_\_\_\_\_  
D/B/A: \_\_\_\_\_  
Bill To: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone#: \_\_\_\_\_  
Fax#: \_\_\_\_\_  
Federal Tax#: \_\_\_\_\_  
Bank Name: \_\_\_\_\_  
Bank Fax#: \_\_\_\_\_

**KEY CONTACT INFORMATION**

Owner(s): \_\_\_\_\_  
Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone#: \_\_\_\_\_ SS# \_\_\_\_\_ Birthdate \_\_\_\_\_

**TYPE OF ACCOUNT REQUESTED**

COD Bank/Certified/Money Order   
COD Check   
Charge-Visa, MasterCard, American Express   
\*\*Net 30 open account requires further application

**CREDIT INFORMATION FOR NET 30 OPEN ACCOUNT**

(Please furnish complete information. If you are not applying for a Net 30 open account, please skip this section)

Type of Business: **Corporation**  **Partnership**  **Proprietorship**   
Amount of credit line requesting: \_\_\_\_\_  
Federal Tax: \_\_\_\_\_  
How long in Business: \_\_\_\_\_

**CREDIT INFORMATION FOR NET 30 OPEN ACCOUNT (cont.)**

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

Name of Bank: \_\_\_\_\_

Bank Contact: \_\_\_\_\_

Street: \_\_\_\_\_

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

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

**TRADE REFERENCES**

■ Company: \_\_\_\_\_ ■ Company: \_\_\_\_\_

Street: \_\_\_\_\_ Street: \_\_\_\_\_

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

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

Contact: \_\_\_\_\_ Contact: \_\_\_\_\_

■ Company: \_\_\_\_\_ ■ Company: \_\_\_\_\_

Street: \_\_\_\_\_ Street: \_\_\_\_\_

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

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

Contact: \_\_\_\_\_ Contact: \_\_\_\_\_

**ADDITIONAL RETAIL LOCATIONS**

Street: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

State/Zip: \_\_\_\_\_ State/Zip: \_\_\_\_\_

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

Contact: \_\_\_\_\_ Contact: \_\_\_\_\_

The submitter hereby bestows upon CTD, Inc., the authority to verify all credit references and other information submitted to CTD, Inc., by the way of attached credit application, and furthermore indemnifies and holds CTD, Inc., harmless from any liability incurred in connection therewith. I, (we) certify that the above information is true and correct and that we can comply with your terms.

**AUTHORIZING SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CONTINUING GUARANTY**

In consideration of credit given or to be given, or other financial accommodations afforded or to be afforded from time to time by Car Tape Distributors, Inc. ("CTD") to \_\_\_\_\_ (hereafter "Customer") the undersigned, jointly and severally if more than one, (hereinafter referred to as "Guarantor"), hereby guarantees to CTD the full and prompt payment and performance, at maturity and at all times thereafter, of any and all indebtedness, obligations or liabilities of every kind and character, whether direct or indirect, whether now existing or hereafter arising, and any and all extensions and renewals thereof, incurred by or growing out of or through the acts of Customer in connection with business done by Customer with CTD, and Guarantor hereby agrees to pay the same.

This Guaranty shall be a continuing, absolute and unconditional Guaranty and shall remain in full force and effect until all such indebtedness, obligations, and liabilities shall be paid and performed. Guarantor may only revoke this Guaranty through written notice, delivered to CTD via certified mail, and Guarantor shall remain liable for any indebtedness, obligations, or liabilities of Customer incurred up to and including fifteen (15) days after the date upon which CTD actually receives notice of Guarantor's revocation of this Guaranty.

The obligations of Guarantor pursuant to this Guaranty shall remain in full force and effect and shall not be limited in any manner nor released by any change in the ownership of Customer, nor by any change in the corporate structure of Customer whether by recapitalization, consolidation, merger, change in location of business, acquisition of the assets of business of Customer by another entity or other reorganization.

In order to hold Guarantor liable hereunder, there shall be no obligation on the part of CTD to resort for payment or performance to Customer, nor other persons or corporations which may be jointly liable for such debts, or resort to any collateral, security, or other rights or remedies whatsoever.

All diligence in collection and all notice of nonpayment, or of the existence and creation of any and all such indebtedness and liabilities, and of any and all extensions of credit and indulgence hereunder are expressly waived by Guarantor. No act or omission or failure to act of any kind, or at any time, upon the part of CTD shall in any way effect or impair this Guaranty.

THIS INSTRUMENT SHALL BE CONSTRUED IN ACCORDANCE WITH THE LAWS OF THE STATE OF INDIANA. ANY ACTION TO ENFORCE THIS INSTRUMENT MAY BE MAINTAINED IN THE COURTS OF THE STATE OF INDIANA, AND GUARANTOR EXPRESSLY WAIVES PERSONAL JURISDICTION TO THE COURTS OF THE STATE OF INDIANA, AND AGREES THAT THE COURTS IN THE STATE OF INDIANA SHALL HAVE PERSONAL JURISDICTION OVER GUARANTOR FOR PURPOSES OF ENFORCING THIS GUARANTY, OR WITH RESPECT TO ANY OTHER LITIGATION INVOLVING THIS GUARANTY.

The individual executing this instrument on behalf of Guarantor hereby represents to CTD that this Guaranty is binding upon and enforceable against Guarantor and, to the extent this Guaranty is determined not to be binding on Guarantor due to the lack of all necessary corporate action, or for any other reason, such individual agrees to be personally liable for all damages incurred by CTD Corp. as a result of this Guaranty not being enforceable against Guarantor.

GUARANTOR: \_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_

## CREDIT CARD PURCHASE AUTHORIZATION

I HAVE COMPLETED THE FOLLOWING CREDIT CARD AUTHORIZATION FORM IN FULL. I UNDERSTAND THAT BY USING MY CREDIT CARD I DO NOT LOSE MY OPTION FOR NET 30 TERMS. EACH TIME I PLACE AN ORDER, I WILL BE GIVEN THE OPTION OF NET 30 (FOR AUTHORIZED NET 30 DEALERS ONLY), C.O.D., CREDIT CARD CHARGES AND/OR FLOOR PLAN TERMS.

MINIMUM CREDIT CARD ORDER WILL BE \$25.00.

MY SIGNATURE BELOW AUTHORIZES CAR-TAPE DISTRIBUTORS (CTD, INC.) TO PROCESS TELEPHONE AND/OR FAX ORDERS TO THE BELOW REFERENCED CREDIT CARD. THESE ORDERS MAY BE GIVEN ONLY BY THE AUTHORIZED PERSONS LISTED BELOW. ANY CHANGES OF AUTHORIZED PERSONS MUST BE MADE IN WRITING TO CTD, INC. I HEREBY ASSUME FULL, UNCONDITIONAL RESPONSIBILITY FOR MAKING PAYMENT FOR ALL ORDERS AND AGREE TO ABIDE BY ALL BILLING AND MERCHANDISE RETURN POLICIES OF CTD, INC. AS OUTLINED IN THE MOST RECENT POLICY LETTER AND I HEREBY AGREE TO BE BOUND BY AND COMPLY WITH THESE POLICIES.



VISA



MASTERCARD



AMERICAN EXPRESS

CARD # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ CCV# \_\_\_\_\_  
(LAST 3 DIGITS ON RIGHT, BACK OF CARD)

COMPANY NAME: \_\_\_\_\_ NAME AS IT APPEARS ON THE CARD: \_\_\_\_\_

AUTHORIZING SIGNATURE: \_\_\_\_\_

**I HAVE READ THE ABOVE CONDITIONS AND HEREBY AGREE TO THE TERMS ABOVE AND IN OUR POLICY LETTER.**

BILLING ADDRESS OF CARDHOLDER: \_\_\_\_\_

NAME (S) OF AUTHORIZED USER (S): \_\_\_\_\_

**THIS FORM MUST BE COMPLETED BEFORE CTD, INC. PROCESSES YOUR ORDER**

## INDIANA GENERAL SALES TAX EXEMPTION CERTIFICATE

(MAY NOT BE USED AS AN AGRICULTURAL OR UTILITY EXEMPTION CERTIFICATE)

NAME: \_\_\_\_\_ ACCOUNT No.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_

### BLANKET SINGLE PURCHASE DESCRIPTION OF ARTICLES

SALE TO RETAILER, SHOLESALER OR MANUFACTURER FOR RESALE ONLY

SALE OF MANUFACTURING MACHINERY, TOOLS AND EQUIPMENT TO BE USED DIRECTLY IN DIRECT PRODUCTION.

SALES TO NOT-FOR-PROFIT ORGANIZATIONS, CLAIMING EXEMPT PURCHASES PURSUANT TO BULLETIN #10.

**NOTE:** MANY PURCHASES BY NOT-FOR-PROFIT ORGANIZATIONS ARE SUBJECT TO SALES TAX; THEREFORE, PURCHASER IS CAUTIONED TO READ BULLETIN #10 BEFORE SIGNING THE CERTIFICATE

SALES TO GOVERNMENTAL UNITS.

OTHER (EXPLAIN): \_\_\_\_\_

I HEREBY CERTIFY UNDER THE PENALTIES OF PERJURY, THAT THE PROPERTY THAT IS TO BE PURCHASED BY THE USE OF THIS EXEMPTION CERTIFICATE IS TO BE USED FOR AN EXEMPT PURPOSE PURSUANT TO THE STATE GROSS RETAIL SALES TAX ACT.

SIGNED: \_\_\_\_\_ TITLE: \_\_\_\_\_

**COMPANY EXEMPTION CERTIFICATES ARE NOT VALID FOR PERSONAL PURCHASES**