



Main Office

36 ANDERSON ROAD
SPRING CITY, PA 19475
(215)943-9911

LIVERPOOL, NY

414 CONTINUUM DRIVE
BUILDING 9
LIVERPOOL, NY 13088
(315)413-0021

TO ALL CREDIT APPLICANTS:

IN AN EFFORT TO EXPEDITE CREDIT APPLICATION PROCESSING WE ARE INCLUDING THE FOLLOWING FORMS.

- 1) APPLICATION- MUST BE SIGNED BY PRESIDENT, VICE PRESIDENT, OWNER, OR A FINANCIALLY RESPONSIBLE INDIVIDUAL.
- 2) PERSONAL GUARANTEE FORM- MUST BE FILLED OUT BY PERSON GUARANTEEING PAYMENT. THE PHONE NUMBER AND ADDRESS MUST BE OF THE PERSON NOT THE BUSINESS.
- 3) REFERENCE REQUEST FORM- WILL BE DUPLICATED TO BE PRESENTED TO LISTED REFERENCES.
- 4) PLEASE SEND YOUR TAX ID FORM WITH COMPLETED REGISTRATION

WHEN FINISHED FILLING OUT APPLICATION, PLEASE EMAIL BACK ALL PAGES TO JENNIFER.SCHEID@GALLAGHERTIRE.COM.

THANK YOU FOR YOUR COOPERATION. PROVIDING US WITH CORRECT AND COMPLETE INFORMATION WILL SPEED UP THE PROCESS. WE LOOK FORWARD TO HAVING YOU AND YOUR COMPANY AS PART OF OUR BUSINESS FAMILY.

APPLICATION FOR CREDIT

BUSINESS NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ FAX NUMBER: _____

ACCOUNTS PAYABLE NAME: _____

ACCOUNTS PAYABLE PHONE NUMBER: _____

ACCOUNTS PAYABLE EMAIL: _____

() CORPORATION () PARTNERSHIP () INDIVIDUAL

INCORPORATED IN THE LAST 12 MONTHS: YES () NO ()

SALES TAX EXEMPT NUMBER: _____

NAME OF OWNER, PARTNER OR PRESIDENT OF BUSINESS: _____

TRADE REFERENCE ON OPEN ACCOUN

BUSINESS NAME	CITY & STATE	EMAIL OR FAX NUMBER
1. _____		
2. _____		
3. _____		

ALL ABOVE INFORMATION WILL BE HELD IN STRICT CONFIDENCE. GALLAGHER TIRE, INC. RESERVES THE RIGHT TO CHARGE 1 ½% MONTHLY INTEREST ON PAST DUE ACCOUNTS. GALLAGHER TIRE, INC. ALSO RESERVES THE RIGHT TO BILL ORDERS C.O.D. OR REFUSE ORDERS ON PAST DUE ACCOUNTS UNTIL THE PROBLEM IS RESOLVED. CUSTOMERS SHALL ALSO PAY ALL COST AND EXPENSES, INCLUDING REASONABLE ATTORNEY AND COLLECTION FEES (AT THE RATE OF 25%-50%), INCURRED IN REMEDYING THE DEFAULT OR THE ENFORCEMENTS OF ANY RIGHTS POSSESSED BY GALLAGHER TIRE, INC. CUSTOMER AGREES THAT ANY ACTIONS FOR COLLECTION SHALL BE BROUGHT IN COUNTY AND REPORTED MONTHLY TO THE CREDIT BUREAU.

SIGNATURE: _____ TITLE: _____

CREDIT REFERENCE REQUEST FORM

TO: _____

ATTN: _____

FAX: _____

DATE: _____

THE COMPANY LISTED BELOW HAS APPLIED TO GALLAGHER TIRE, INC. FOR CREDIT AND HAS GIVEN YOUR COMPANY AS A REFERENCE. PLEASE BE KIND ENOUGH TO PROVIDE THE BASIC CREDIT INFORMATION WE HAVE REQUESTED AND EMAIL IT TO JENNIFER.SCHEID@GALLAGHERTIRE.COM OR FAX IT TO 215-943-3741 AT YOUR EARLIEST CONVENIENCE.

CUSTOMER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBER: _____

SIGNATURE OF APPLICANT: _____

- 1) HOW LONG HAVE YOU BEEN DOING BUSINESS WITH THIS CUSTOMER? _____
- 2) CREDIT LINE? _____ OR HIGH CREDIT TO DATE? _____
- 3) ARE THEY CURRENT? _____ BALANCE OWED _____
- 4) AVERAGE DAYS TO PAY _____
- 5) HAVE YOU HAD ANY PROBLEMS WITH THIS CUSTOMER? _____

NAME OF PERSON SUPPLYING INFORMATION _____

THANK YOU FOR TAKING THE TIME TO HONOR OUR REQUEST FOR INFORMATION.
WE WILL BE HAPPY TO RECIPROCATATE.

PERSONAL GUARANTEE

(FILL IN NAME OF COMPANY GRANTING CREDIT)

IN CONSIDERATION OF GALLAGHER TIRE, INC. EXTENDING CREDIT TO THE BUSINESS IDENTIFIED BELOW FOR ANY MATERIALS AND/OR SERVICES AFTER THIS DATE AT THE REQUEST OF APPLICANTS OR ITS AGENTS, THE UNDERSIGNED INDIVIDUAL HEREBY PERSONALLY GUARANTEES UNCONDITIONALLY AND IRREVOCABLY THE PROMPT PAYMENT OF ANY SUMS NOW OR HEREAFTER OWED TO GALLAGHER TIRE, INC. BY THE BUSINESS IDENTIFIED BELOW WHETHER SAID SUMS ARE DUE UNDER OPEN ACCOUNT, CONTRACT OR OTHERWISE.

IT IS UNDERSTOOD AND AGREED THAT CREDIT, IF EXTENDED, IS TO BE ON A CONTINUING BASIS AND MAY EXCEED ESTIMATED MAXIMUM CREDIT LIMIT REQUIRED AS STATED IN THE CREDIT AGREEMENT BETWEEN GALLAGHER TIRE, INC. AND THE BUSINESS. GALLAGHER TIRE, INC. SHALL NOT BE OBLIGATED TO NOTIFY THE UNDERSIGNED OF THE DATES OR AMOUNTS OF ANY SUCH CREDIT AND THE UNDERSIGNED WAIVES DEMAND, NOTICE OF DEFAULT AND ANY EXTENSION OF TIME OR ANY OTHER FORBEARANCE WHICH MAY BE EXTENDED BY GALLAGHER TIRE, INC.

THIS GUARANTEE SHALL CONTINUE IN FORCE UNTIL NOTICE IN WRITING, SENT BY REGISTERED OR CERTIFIED MAIL, RETURN RECEIPT REQUESTED BY GALLAGHER TIRE, INC. SAID NOTICE SHALL SPECIFY THE DATE ON WHICH THIS GUARANTEE IS TO BE TERMINATED, SAID THE DATE NOT TO BE LESS THAN SEVEN DAYS AFTER SUCH NOTICE IS RECEIVED. SUCH TERMINATION SHALL IN NO WAY RELEASE THE UNDERSIGNED AS TO ANY SUM OR DEBT INCURRED PRIOR TO SUCH TERMINATION.

DATE _____

NAME _____ (NAME OF PERSON GUARANTEEING PAYMENT)

HOME ADDRESS _____

HOME PHONE _____ SS# _____

SIGNATURE OF PERSON GUARANTEEING PAYMENT

NAME OF BUSINESS WHOSE ACCOUNT IS GUARANTEED
