

Sales Rep: _____



Please Return Application To:
Fax #: (205)-942-6622
E-Mail: ap@mysouth.com

CREDIT APPLICATION

AllSouth Appliance Group, Inc.

Company Name: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Office Phone: _____ Cell: _____ Fax: _____

Billing Address if different: _____ City: _____ State: _____ Zip: _____

Accounts Payable Contact: _____ E-Mail: _____ Phone: _____

Credit Line Amount Requested: _____

Proprietorship: Corporation: Partnership: LLC: Years in business: _____

If proprietorship, please list home address: _____

<i>Company Principal(s) Name:</i>	<i>Title:</i>	<i>SSN:</i>
<i>Address:</i>		<i>Phone #:</i>
<i>E-Mail Address:</i>		<i>Ownership Percentage:</i>
<i>Company Principal(s) Name:</i>	<i>Title:</i>	<i>SSN:</i>
<i>Address:</i>		<i>Phone #:</i>
<i>E-Mail Address:</i>		<i>Ownership Percentage:</i>
<i>Company Principal(s) Name:</i>	<i>Title:</i>	<i>SSN:</i>
<i>Address:</i>		<i>Phone #:</i>
<i>E-Mail Address:</i>		<i>Ownership Percentage:</i>

Bank Reference 1: _____ Officer: _____ Phone: _____ Email: _____

Bank Reference 2: _____ Officer: _____ Phone: _____ Email: _____

Please list your flooring, lighting, plumbing, or other furnished good supplier:		
<i>Business Name:</i>	<i>Contact Name:</i>	
<i>Phone #:</i>	<i>Fax #:</i>	<i>E-Mail Address:</i>
<i>Business Name:</i>	<i>Contact Name:</i>	
<i>Phone #:</i>	<i>Fax #:</i>	<i>E-Mail Address:</i>
<i>Business Name:</i>	<i>Contact Name:</i>	
<i>Phone #:</i>	<i>Fax #:</i>	<i>E-Mail Address:</i>

FLORIDA GUARANTY

The above information is given for the purpose of obtaining credit and is warranted to be true. We affirmed that we are financially able to meet our obligations, and will remit in accordance with the invoice terms. The applicant authorizes the above named creditor to obtain written or oral credit report from any credit reporting agency. The applicant further authorizes any bank or commercial business with whom the applicant is doing or has done any type of business to give any and all necessary information to the creditor which will assist creditor in the credit investigation. The applicant further authorizes the creditor to reinvestigate the applicant's credit status from time to time and the creditor, may, at any time, at its discretion, limit or terminate the credit arrangement with applicant. The undersigned further agrees that should credit be extended and in the event undersigned defaults in its credit arrangement with the above named creditor, the undersigned agrees to pay a reasonable attorney's fee should the account be placed with an attorney for collection. Applicant expressly waives all right of exemption under the constitution and laws of the state of Florida or any other state. Applicant agrees to pay a finance charge of 1.5% per month on any unpaid past due balance.

Print Name: _____ Date: _____ Signature: _____

INDIVIDUAL PERSONAL GUARANTY

To: AllSouth Appliance Group, Inc. I, _____, residing at _____
_____, for and in consideration of you extending credit at my request to _____
_____ (hereinafter referred to as the "Company") of which I am the _____
_____ (title).

I hereby personally guarantee to you the payment at Allsouth Appliance Group, Inc.

In the State of Florida of any obligation of the Company, and I hereby agree to bind myself to pay Allsouth Appliance Group, Inc. on demand any sum which may become due by the Company whenever the Company shall fail to pay the same plus any collection costs including collection fees. It is understood that guaranty shall be continuing and irrevocable guaranty and indemnity for such indebtedness of the company. I hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal to the credit agreement hereby guaranteed.

Signature of Guarantor

Date

Witness

Date

Please remit payments to:

345 State Farm Parkway
Birmingham, AL 35209

For questions about billing please contact:

Please email Kim Ray directly at
ap@mysouth.com or call at
205.942.0408 Ext. 300.