

Dear Customer,

The enclosed credit application must be filled out entirely in order for it to move quickly through the processing phase. Please note the following while filling out your application:

- 1. The business address under "Business Information" must be the physical address.
- 2. The "Information for Proprietor, Partners or Officers" section needs to be filled out.
- 3. Please provide the phone number of your local bank branch, no 800 numbers please.
- 4. Please sign the guarantee of payment on both sets of lines at the end of this application

To return your completed credit application, please choose one of the following delivery methods:

□ By mail:

REVCO Lighting and Electrical Supply, Inc. Attn: Credit Department P.O. Box 1539 Southampton, NY 11969-1539

□ By fax: 631-283-0568

□ By e-mail:

jeanetted@revcoelectric.com

If there are any questions, please feel free to call us at 631-283-3600.

Sincerely,

Revco Lighting and Electrical Supply, Inc.

360 County Road 39A Southampton, NY 11968 403 Griffing Avenue Riverhead, NY 11901 50 Gingerbread Lane East Hampton, NY 11937 55765 Main Road Southold, NY 11765 323B Route 25A Miller Place, NY 11764 20 Orville Drive Bohemia, NY 11716 T. 631-283-3600 F. 631-283-0568 T. 631-369-1900 F. 631-369-1904 T. 631-329-4600 F. 631-329-2429 T. 631-765-6600 F. 631-765-3730 T. 631-509-6340 F. 631-509-6344 T. 631-503-5050 F. 631-503-5051



Phone: 631-283-3600 Fax: 631-283-0568

## CREDIT APPLICATION / SECURITY AGREEMENT

BUSINESS INFORMATION:			
Name of Business:			
Business Physical Address:			
City:	State:	Zip Code:	
Type of Business (Check One): (	Corporation	Proprietorship	PartnershipSelf
Tax/Federal ID#:		Year Establi	shed:
If Incorporated: State of Incorpo	ration:	D	ate:
Nature of Business:		Last Year Gro	ss Sales: \$
Business Property (Check one):	Leased (	Owned-Mortgage h	eld by:
Telephone Number:	Cell	ular Phone:	
Billing email:	Invi	tation email:	
Electrician's License Number:Date:			
Driver's License Number			
Have you filed business or perso	nal bankruptc	y within the last 5 y	years?
Yes:No:If Yes DateExplain:			
Has a tax lien been filed against	your company	or individual own	ers in the last 5 years?
Yes:No:If Yes, DateExplain:			
BILLING INFORMATION:			
Mailing Address:			
City:	Stat	e:Ziړ	Code:
Accounts Payable Contact Perso	n:	Phone 1	Number:
Tax Status (Check one): Taxable	e: Exem	pt*	

\*ATTACH APPROPRIATE SIGNED CERTIFICATE\*



## INFORMATION FOR PROPRIETOR, PARTNERS OR OFFICERS

1. Name:			
	% Owned		
Home Address:			
City:	State:Zip Code:		
Telephone Number:	(Check one) Owned:Rented:		
Mortgage Holder:			
Date of Birth:	Social Security:		
2. Name:			
	% Owned		
Home Address:			
City:	State:Zip Code:		
Telephone Number:	(Check one) Owned:Rented:		
Mortgage Holder:			
Date of Birth:	Social Security:		
3. Name:			
Title:	% Owned		
Home Address:			
City:	State:Zip Code:		
Telephone Number:	(Check one) Owned:Rented:		
Mortgage Holder:			
Date of Birth:	Social Security:		



BANK REFERENCE:			
Name of Bank:			
Bank Address:			
		Zip Code:	
Contact:		Title:	
Telephone Number:		Fax Number:	
ACCOUNT NUMBER: _		Account Type:	
ACCOUNT NUMBER: _		Account Type:	
TRADE (CREDIT) REFE	ERENCES:		
Contact 1			
Name:			
Address:			
City:	State:	Zip Code:	
Telephone Number:		Fax Number:	
Contact 2			
Name:			
Address:			
City:	State:	Zip Code:	
Telephone number:		Fax Number:	
Contact 3			
Name:			
Address:			
City:	State:	Zip Code:	
Telephone Number:		Fax Number:	

Date



AMOUNT OF CREDIT REQUESTED: \_

Print Name

OUR AGREED CREI 1. Payment is due in 2. A service charge 3. Purchaser will b	DIT TERMS ARE: n accordance with the terms of e of 2% per month will be im	ongoing account: of sale as shown on our invoice posed on all past due balances. nent of all attorneys fees and co	ourt costs on all due acco	ounts	
DECLARATION	•				
individuals. I authorize deemed necessary to d other institutions to se	e the above references to rel letermine my/our creditwort cure financing.	ease information necessary for	Revco to make an inforr	ssary credit investigation on the med credit decision. Revco is heir credit experience with us, a	authorized to make all inquiries
RELEASE OF CRED					
individual credit histor	ry may be a factor in the eva		the applicant, hereby cor	orship of the credit applicant, re neerts to and authorizes the use dit evaluation process.	-
GRANT OF SECURI	TY INTEREST				
Revco a continuing se including electronic cl commercial tort claim security interest is exp all indebtedness, liabil favor of Revco, include defaults: Non-paymen respect of any provision materials supplied by In addition, Applicant hereof. Applicant au be appropriate pursuar UCC/PPSA Change St.  GUARANTEE OF PAThe undersigned agree responsible for all invecollection, including responsible for all invectors.	curity interest in all of Debta attel paper and tangible chas, (I) general intangibles, (molicitly limited to outstanding lities and obligations, liabilities and obligations, liabilities and yet at in timely fashion of Custor on of this or any Agreement Revo do not pass until the herby notifies its authorizat thorizes Revco to file a Unint to the UCC. Debtor wait tatement.	or's presently owned or hereaft attel paper, (e) documents, (f) by payment intangibles and (n) significant good payment intangibles and (n) significant good payment intangibles and (n) significant good payment goo	er acquired (a) goods, (b) cooks and records, (g) according to gother with all and Debtor. The term "o re, however arising whet be entitled as further proankruptcy, insolvency, or In the event of default, 1. Customer authorizes my jurisdiction any finan UCC") Financing Statement evidencing the customer authorizes arising statement evidencing the customer arising statement	Il proceeds and all support oblig bligations" as used in this agree ther monetary or otherwise, now vided in this Agreement. The r assignment for the benefit of control, Revco may declare all unpaid Revco to file a financing stater	otes, (d) Chattel paper (i) equipment, (j) inventory, (k) gations thereof. Revco's ement shall mean and include v existing or hereafter arising in following constitute Customer creditors; misrepresentation in balances due. Title to any ment describing the collateral. Is thereto if filed prior to the date arisdiction(s) Revco deems to PSA Financing Statement or  dicant, the undersigned will be igned will pay all cost of
Signature	Title	Date	Signature	Title	Date
Signature	Title	Date	Signature	Title	Date
Print Name		Date	Print Name		Date
and/or severally guaran sums that may, for any promissory note or any protest or notice or prot could have been taken a legal action be instituted release of purchaser fro	tee and my-self (ourselves) pereasons or purpose, be due or other form of indebtedness. I estor any notice of any other engainst purchaser. Upon demaid against purchaser, I (we) agr	ersonally responsible to your com- become due to you from the vari- (we), hereby waive notice of accevidences of indebtedness and no nd from you, I (we) will pay you tee to pay any and all late fees, co- me (us) except to the extent of pay	pany and/or your successor ous products and/or service eptance hereof of amount of tice of nonpayment thereo immediately any and all si sts of collection and reason	es from your company, whether e of sales, date of shipment or deliv f, I (we), further waive all require	ice and payment, when due, of all evidence by open account, very, and default in payment, ements of legal proceedings that int of default by purchaser. Should e and one third percent. Any
Signature	Title	Date	Signature	Title	Date

Print Name

Date



## **Bank Account Inquiry Authorization**

To whom it may concern,

I hereby give permission to release basic information regarding my bank accounts to REVCO Lighting and Electrical Supply, Inc. The information provided by my banking institution is for the express purpose of REVCO Lighting and Electrical Supply, Inc.'s Credit Department use.

Signature:	
Print Name:	
Company:	
Date:	



Dear REVCO Customers,

## HELP...

US protect you... From time to time we try to update our purchasing records, for your protection and for ours as well. If you would, please let us know whom within your company is authorized to make REVCO purchases. Please fax this form to 631- 283-0568; Attention A/R, or e-mail to <a href="mailto:ar@revcoelectric.com">ar@revcoelectric.com</a>. Thank you very much for your help with this!

*Authorized purc	hasers include:	
Name:	Title:	
possibility of fraudulent p	urcnasingCusto	omer Number
Authorized Company Rep		
Print Name	Title:	Date:
Thank you very resuccess with you.	nuch for your help and we look forwa	ard to enjoying continued
Sincerely,		
REVCO Lighting and Ele	ectrical Supply. Inc.	



Dear Customer,

Thank you!

In our effort to save energy and resources, Revco's bills are delivered electronically. Please provide your e-mail address in the space provided and check off which documents you would like to receive.

Invoices
Statements
Newsletters
General Announcements
E-mail Address:
Company Name: