



## Customer Credit Application

**SEND COMPLETED APPLICATION VIA**

Email: [meghan@doorvida.com](mailto:meghan@doorvida.com) Fax: 407.593.6644  
**INCLUDE SIGNED W9 & SALES CERTIFICATE**

Pending Order

Yes

No

Payment Preference:

ACH

Check

Credit/Debit Card

### COMPANY INFORMATION

Company Legal Name:

D&B Number:

DBA:

Year DBA Established:

Phone:

Fax:

Company Website:

Mailing Address:

Shipping Address (*if different*):

Type of Business: Sole Proprietorship Partnership LLC Corporation Date of Incorporation:

FEIN: Tax Exempt: Projected Amount of Monthly Purchases:

### PRINCIPLE OWNERS

Name:

Name:

Home Address:

Home Address:

Title:

Title

SSN:

SSN:

### PREFERRED CONTACTS

Purchasing Contact Name:

Accounts Payable Contact Name:

Email:

Email:

Direct Number:

Ext.

Direct Number:

Ext.

### REFERENCES

Business Name:

Business Name:

Contact Name:

Contact Name:

Direct Number:

Ext.

Direct Number:

Ext.

Account #:

Account #:

### AGREEMENT

I, the undersigned, hereby swear (under penalties of perjury and false swearing), that all of the information shown on this application is true. I further certify if any property so purchased tax free is used or consumed by the firm as to make it subject to Sales or Use Tax, we will pay the tax due directly to the proper tax due directly to the proper taxing authority when the state law provides or inform the seller for added tax billing. DoorVida and/or its parent company, Wall to Wall Carpentry LLC, is hereby authorized to investigate all trade references and obtain information from credit reporting agencies. I understand that credit is extended by DoorVida for my convenience and that DoorVida shall have the right to terminate this agreement at any time without notice to me. I agree that upon termination of this credit agreement, all sums owing on the date of termination shall be immediately due and payable, together with charges applicable thereto.

Print Name:

Signature:

Date:

Print Name:

Signature:

Date:

OFFICE USE ONLY: DR

APP

DEN

BY

RSN

**TERMS & CONDITIONS**

**Terms apply upon application approval. All approved accounts are on net 30 payment terms from dated invoice(s).  
Term discounts do not apply.**

**TIME PRICE DIFFERENTIAL (Service Charge)**

2% (two percent) per month added to all accounts after the expiration of terms granted.

**RETURNS**

Stock Items: 20% Restocking fee applies.

Special Order/Custom: All sales final; No credit allowances on special order items, non-stock items, other specialty merchandise, nor on dirty, damaged, or unusable merchandise.

**DEFAULT**

If any default occurs, all amounts owed by customer shall become immediately due and payable. If the account is placed for collection, customer and guarantors agree to pay all expenses of collection, including, but not limited to actual attorney fees incurred by Wall to Wall Carpentry, LLC and its DBA DoorVida.

**LIMITATION OF REMEDIES**

The undersigned, in consideration of the sales on credit to the customer listed on application, all jointly, each severally, and each jointly with each other, do unconditionally and irrevocably personally guarantee the payment of this account when due according to its terms. REFERENCE TO OFFICE HOLDERS BELOW IS FOR IDENTIFICATION ONLY AND DO NOT LIMIT PERSONAL LIABILITY, OR RELIEVE, THE UNDERSIGNED FROM JOINT AND SEVERAL, PERSONAL LIABILITY GUARANTEES. Revocation of this guaranty of payment can be made only in writing sent certified mail, return receipt requested to Wall to Wall Carpentry, LLC and its DBA DoorVida. Revocation of the guaranty of payment will be effective only when received by seller and only as to materials sold after the date of the receipt of the Notice of Revocation. Guarantors waive any right to notice of nonpayment, demand or presentment, waive notice of acceptance of this guaranty and consent to all changes of terms, extensions of credit, releases of security and any extensions or forbearance by seller shall have no effect on the enforceability of this guaranty. In the event of nonpayment under the guaranty, the undersigned agrees to pay all costs of collection, including reasonable attorney's fees, incurred to enforcement of this guaranty.

**BY SIGNING BELOW, THE UNDERSIGNED OFFICER HEREBY AGREES TO ALLOW THE REFERENCES LISTED ABOVE TO FULLY DISCLOSE TO WALL TO WALL CARPENTRY, LLC AND ITS DBA DOORVIDA ALL PERTINENT CREDIT INFORMATION.**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FULL NAME (PRINT)

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FULL NAME (PRINT)

\_\_\_\_\_  
SOCIAL SECURITY NUMBER