



**AGREEMENT FOR SALE OF GOODS ON OPEN ACCOUNT**

Name of Account: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Street/Delivery Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Structure: Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ Date Started: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Monthly Request: \$ \_\_\_\_\_ Federal ID Number: \_\_\_\_\_

Email: \_\_\_ or Fax \_\_\_ invoices to: \_\_\_\_\_ State Sales Tax Number: \_\_\_\_\_

What Types Of Product Are You Interested In Renting/Purchasing? \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Name Under Which Bank Account Is Carried: \_\_\_\_\_

Name Of Bank Official With Whom You Do Business: \_\_\_\_\_

**TRADE REFERENCES: Name, Address, & Phone Number of 3 Credit References Where You Have Current Account:**

- 1. \_\_\_\_\_  

Name	Address	Phone	Fax
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- 2. \_\_\_\_\_  

Name	Address	Phone	Fax
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- 3. \_\_\_\_\_  

Name	Address	Phone	Fax
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**Name, Address, and Phone Number of Principal Owners, Partners or Stockholders:**

- 1. \_\_\_\_\_  

Name	Address	Phone
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- 2. \_\_\_\_\_  

Name	Address	Phone
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I authorize ATP Containers (dba TuffBox Containers), LLC to run credit on above mentioned applicant. I also state that I have authority to give this authorization.

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_

Company Name: \_\_\_\_\_

**CREDIT TERMS AND AGREEMENT**

Our terms are DUE UPON RECEIPT, unless otherwise specified. Should invoices on this account become past due, applicant agrees to pay a late fee of \$50 per month, per invoice on all past due invoices.

Your account will be assigned a MAXIMUM CREDIT LIMIT, subject to review at any time, and should your unpaid balance exceed this limit, you will be required to make a payment on your account prior to the due date or accept purchases on a "CASH ON DELIVERY" basis until such time as your balance is reduced to within your credit limit. ATP Containers, LLC reserves the right to discontinue "CHARGE" shipments should your account become past due; if there is an ownership or name change; in the event of bankruptcy; or at any time ATP Containers, LLC, for good cause, deems itself insecure.

The applicant hereby authorizes a full and complete investigation by ATP Containers, LLC and understands that ATP Containers, LLC will not process a "CHARGE" order until a signed and completed credit application has been submitted and approved.

Should it be necessary to place this account in the hands of an attorney for collection, or a collection agency, applicant agrees to pay the reasonable attorney's fees and all costs of collection.

This CONFIDENTIAL CREDIT APPLICATION contains all terms negotiated between the parties and may be modified only upon written agreement between ATP Containers, LLC and the Applicant.

BOND? \_\_\_\_\_ YES \_\_\_\_\_ NO / BONDING COMPANY \_\_\_\_\_

**I/WE HAVE READ THE TERMS OF THIS AGREEMENT AND AGREE TO BE BOUND BY THEM IN ALL RESPECTS (MUST SIGN ONE OF THE FOLLOWING)**

**PERSONAL GUARANTEE**

In consideration of the extension of credit privileges, I (we) hereby grant ATP Containers, LLC a continuing guaranty of payment of this account and agree to personally guarantee payment of all indebtedness, including interest, collection costs and expenses as stated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**CORPORATE GUARANTEE**

In consideration of the extension of credit privileges, I (we) hereby grant ATP Containers, LLC a continuing guaranty of payment of this account and agree to guarantee payment of all indebtedness, including interest, collection costs and expenses as stated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Must be a Principal or Officer of the Company)

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_