



All Star Wholesale Electric  
 13810 S. Prairie Ave.  
 Hawthorne, CA 90250  
 Tel: (424) 236-4492  
 Fax: (424) 236-4495

## CREDIT APPLICATION AND GUARANTEE AGREEMENT

FIRM NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NATURE OF BUSINESS \_\_\_\_\_ LICENSE # \_\_\_\_\_

PHONE # \_\_\_\_\_ DATE BUSINESS ESTABLISHED \_\_\_\_\_ RESALE PERMIT # \_\_\_\_\_

TYPE OF BUSINESS:  PARTNERSHIP  SOLE PROPRIETOR  CORPORATION

THE OWNERS OR STOCKHOLDERS ARE:

<u>NAME(S)</u>	<u>TITLE</u>	<u>RESIDENCE ADDRESS</u>	<u>CITY &amp; STATE</u>	<u>PHONE</u>
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

BANKS OR SAVINGS & LOAN ASSOCIATIONS:

<u>NAME</u>	<u>BRANCH ADDRESS</u>	<u>ACCOUNT NO.</u>	<u>TYPE OF ACCOUNT</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WE HAVE OPEN CREDIT ACCOMMODATIONS WITH:

<u>FIRM NAME</u>	<u>ADDRESS</u>	<u>CITY</u>	<u>PHONE</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PRINCIPAL'S SOCIAL SECURITY NO. \_\_\_\_\_ DRIVER'S LICENSE \_\_\_\_\_

HAS A TAX LIEN OR CIVIL SUIT BEEN FILED AGAINST APPLICANT OR ANY OF ITS OWNERS, PRINCIPALS, OFFICERS, OR DIRECTORS WITHIN THE PAST SIX YEARS ? \_\_\_\_\_

HAS APPLICANT OR ANY OF ITS OWNERS, PRINCIPALS, PARTNERS, OFFICERS, OR DIRECTORS EVER FILED A VOLUNTARY PETITION IN BANKRUPTCY, BEEN ADJUDGED BANKRUPT, OR MADE AN ASSIGNMENT FOR THE BENEFIT OF CREDITORS ? \_\_\_\_\_

THIS CREDIT APPLICATION IS GIVEN TO SECURE OPEN ACCOUNT CREDIT. THE INFORMATION CONTAINED HEREIN IS CORRECT, COMPLETE AND TRUE.

In consideration for the extension of credit by ~~CHUAY @ P. # A. & B.~~, the undersigned hereby agrees to personally guarantee payment of any indebtedness owing to ~~CHUAY @ P. # A. & B.~~ Should legal action be required to collect said indebtedness and to enforce this personal guarantee, then the undersigned further agrees to pay reasonable attorney fees.

Applicant and the undersigned, jointly and severally, acknowledge that A SERVICE CHARGE COMPUTED ON THE BASIS OF ONE AND ONE-HALF PERCENT (1 ½ %) PER MONTH OF ALL SUMS DUE TO ~~CHUAY @ P. # A. & B.~~ WHICH HAVE NOT BEEN PAID WITHIN THIRTY DAYS (30) FROM THE DATE SHALL BE CHARGED TO APPLICANT.

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NAME OF APPLICANT (COMPANY NAME)

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SIGNED BY TITLE

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DATE