



CREDIT APPLICATION

MakeShaper
P.O. BOX 192
Sanford, North Carolina 27331-0192
Attn: Customer Financial Services
Fax: 919-774-3364
Email to: CFS@scc-inc.com

APPLICATION DATE:

COMPLETED BY:

If purchase is for resale - A copy of your state sales tax certificate must accompany your application (US only)

COMPANY NAME: AP CONTACT:
D/B/A OR TRADE STYLE: AP PHONE/EMAIL:
STREET ADDRESS: PURCHASING CONTACT:
CITY: PURCHASING PHONE:
STATE/PROVINCE: CELL:
ZIP/POSTAL CODE: EMAIL ADDRESS:
PHONE: SHIPPING ADDRESS:
FAX:

BUSINESS INFORMATION:

CORPORATION [] LLC [] PARTNERSHIP [] SOLE PROPRIETORSHIP []
YEAR ESTABLISHED: STATE OF INCORPORATION: PUBLIC OR PRIVATELY HELD:

OWNERS/OFFICERS INFO: PARTNERSHIPS MUST INCLUDE INFORMATION FROM ALL PARTNERS

Table with 4 columns: FULL LEGAL NAME & TITLE, HOME ADDRESS, SOC SEC NUMBER, HOME/CELL PHONE

PREMISES: OWNED [] RENTED []
SELL PRIMARILY TO: RETAIL [] WHOLESALE [] DISTRIBUTOR []

BANK REFERENCE:

BANK NAME: CONTACT PERSON: PHONE:
CHECKING ACCOUNT NUMBER: SAVINGS ACCOUNT NUMBER: EMAIL:
LENDERS NAME: CONTACT PERSON: PHONE:
LOAN NUMBER: LOAN TYPE: EMAIL:

TRADE REFERENCES: Please do not include utilities, credit lines or leases.

COMPANY: CONTACT: PHONE:
ACCOUNT NUMBER: EMAIL:
COMPANY: CONTACT: PHONE:
ACCOUNT NUMBER: EMAIL:
COMPANY: CONTACT: PHONE:
ACCOUNT NUMBER: EMAIL:



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BUSINESS TO BUSINESS

ESTIMATED ANNUAL SALES:	CREDIT LINE REQUESTED:
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*If over \$5,000, please include recent financial statement

PO REQUIRED?	MONTHLY STATEMENT REQUIRED? <input type="checkbox"/>
	ELECTRONIC INVOICE? <input type="checkbox"/>

CORPORATE CREDIT CARD: (VISA, MC, AMEX accepted)	EXPIRATION DATE:
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FEDERAL TAX ID:	DUNS NUMBER:
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NUMBER OF EMPLOYEES:	COMPANY WEBSITE ADDRESS:
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I hereby represent that I am authorized to submit this credit application on behalf of the company named on the application, and that the information is provided for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize MakeShaper to perform any credit investigation deemed necessary to establish and maintain a credit account for the applicant. I/We hereby authorize the reporting of the above-mentioned information to MakeShaper or their designees. I/We hereby acknowledge and agree that all charges incurred after the extension of credit shall be considered due and payable according to the terms on the invoice and that payment shall be made to MakeShaper and forwarded to the designated payment address. I/We hereby agree to abide by each of the MakeShaper terms and conditions set out on all invoices ("terms and conditions") as may be amended from time to time and which are incorporated herein by reference. I/We agree and understand that all collection expenses, including but not limited to collection agency fees, reasonable attorney fees, court costs, filing fees, interest, and service fees may be charged to Me/Us in the event of My/Our default or failure to pay for goods and services provided. I/We agree that MakeShaper may charge interest at the maximum rate allowed by law on all past due obligations, in the event of My/Our default or failure to pay for goods and services sold and delivered. I/We represent that neither I/We nor any entities I/We control or are affiliated with have ever been the subject of a lawsuit which involved a claim by a supplier for payment for goods and services delivered. I/We hereby acknowledge receipt of a copy of the current terms and conditions and agree to abide by amendments to these terms and conditions as they are posted on the MakeShaper website. This agreement shall be governed and construed in accordance with the substantive laws of the State of North Carolina without regard to choice of law provisions.

A facsimile or PDF copy of this document containing the required signatures and maintained in the regular course of business shall be considered for all purposes as the original document.

SIGNATURE: _____	DATE: _____
I consent to my signature on a facsimile or PDF copy of this document being legally binding.	
(OWNER/OFFICER)	
PRINT NAME: _____	TITLE: _____

The undersigned individual who is either a principal of the credit applicant or the sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

SIGNATURE: _____	DATE: _____
I consent to my signature on a facsimile or PDF copy of this document being legally binding.	



PERSONAL GUARANTY

CREDIT APPLICATION

TO: MakeShaper

TO INDUCE YOU TO DO BUSINESS WITH OR CONTINUE BUSINESS WITH THE FOLLOWING BUSINESS ACCOUNT:

_____ (“Buyer”)

(Business name as shown on credit application must be filled in.)

The undersigned as “GUARANTOR” acknowledges a direct and financial interest in BUYER and hereby unconditionally, jointly and severally, guarantees the full and prompt payment, and at all times thereafter, of any and all indebtedness, obligations and liabilities of any kind and nature, arising out of the purchase of all such goods and services furnished or to be furnished, whether evidenced by open account, acceptance, note or otherwise. GUARANTOR’s liability shall be for the full balance due by BUYER including applicable interest, court costs and attorney fees.

GUARANTOR hereby expressly waives notice of acceptance, amount of sales, dates of shipment or delivery, and waives notice of any default on the part of BUYER, or of any extension of time to pay obligations granted to BUYER, and GUARANTOR does hereby consent to any and all extensions which may be granted to BUYER from time to time. There shall be no obligation on MakeShaper, at any time, to resort for payment to BUYER or resort to any collateral security, property, liens or any other rights or remedies whatsoever and MakeShaper shall have the right, but is not required, to proceed against GUARANTOR immediately upon any default by BUYER. If GUARANTOR is a spouse or other relative of any other guarantor, GUARANTOR represents and warrants to MakeShaper that GUARANTOR directly participates in the business activities of BUYER, has a direct financial interest in BUYER and has access to the books and records of BUYER to the extent necessary to make an informed decision whether to become a guarantor of Buyer’s obligations to MakeShaper.

GUARANTOR further agrees that this shall be an absolute and unconditional personal guaranty of payment and shall be continuing and shall remain in full force and effect until written notice by certified mail of its discontinuance shall be actually received by MakeShaper and also until any and all such indebtedness, obligations and liabilities, existing before receipt of such notice shall be fully paid. GUARANTOR’s liability hereunder shall not be canceled, nor shall GUARANTOR be released hereunder in consequence of any covenants, agreements or acts by MakeShaper in dealing with BUYER. The death of GUARANTOR shall not terminate this Personal Guaranty until notice is given as provided herein, and every part hereof shall be binding on GUARANTOR, GUARANTOR’s heirs, executors, administrators and assigns. MakeShaper may add other guarantors for BUYER. The addition of other guarantors by MakeShaper shall not affect the obligations of GUARANTOR as set forth herein. The deletion of one or more guarantors shall not affect the obligations of any remaining guarantor.

GUARANTOR agrees that this Personal Guaranty agreement shall be governed and construed in accordance with the substantive laws of the State of North Carolina without regard to choice of law rules. Guarantor also agrees that the venue for any action arising out of this Personal Guaranty shall be in any court, state or federal, within the State of North Carolina having subject matter jurisdiction. Guarantor agrees to submit to Personal Jurisdiction in any court, federal or state, within North Carolina. By entering my name below, I understand I am signing this Guaranty electronically in accordance with the North Carolina Uniform Electronic Transaction Act (NCGS 66-311 et seq). I agree my electronic signature (E-signature) is the legal equivalent of my manual signature and that no third party verification is necessary to validate my E-signature. I agree that by the entry of my E-signature below, I am fully bound by the terms and conditions of this Guaranty.

GUARANTOR: _____ SSN: _____
(Print full name)

SIGNATURE: _____ (Seal) Date: _____

I consent to my signature on a facsimile or PDF copy of this document being legally binding.

WITNESS: (SIGNATURE) _____ Date: _____

SPOUSE AND/OR ADDITIONAL OFFICERS

GUARANTOR: _____ SSN: _____
(Print full name)

SIGNATURE: _____ (Seal) Date: _____

I consent to my signature on a facsimile or PDF copy of this document being legally binding.

WITNESS: (SIGNATURE) _____ Date: _____