



OMNISOURCE UNITED, INC.

Credit Application - Commercial

Please Type or Print

Business Name	Area Code/Phone #	Fax #	<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship
Mailing/Billing Address	City	State	Zip
Street Address (If Different From Mailing Address)	City	State	Zip
Name of Owner/President/Partner SS#	Home Address	City	State Zip Phone & Fax #
Name of Vice President/Partner SS#	Home Address	City	State Zip Phone & Fax #
Name of Secretary/Treasury SS#	Home Address	City	State Zip Phone & Fax #
Resale Tax Number (If Applicable) - Attach Certificate	Employer I.D. Number	E-Mail Address	
Years In Current Business Business Property <input type="checkbox"/> Own <input type="checkbox"/> Rent	Purchase Order Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Authorized Agent(s):	
Shipping Address (If Different From Above)	City	State	Zip Phone & Fax #
Primary trade References	Total Tire Purchases Annually (\$): Estimated Monthly Tire Purchases from Omnisource		
Name & Account #	City	State	Zip (\$) Phone & Fax #
Name & Account #	City	State	Zip Phone & Fax #
Name & Account #	City	State	Zip Phone & Fax #
Name & Account #	City	State	Zip Phone & Fax #

For Omnisource's Representative to complete

Store Number:	Route:
Sales Person:	Price Level:
Account Type: C (<input type="checkbox"/>) W (<input type="checkbox"/>) G (<input type="checkbox"/>)	Cash Tracking: (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No

BILLING

The Omnisource United, Inc. billing period begins on the 26th day of the current month and ends on the 25th day of the following month. If the 25th falls on Sunday or holiday, then the billing period ends on the weekday prior.

The 10th day of each month is the payment due date.

Statements are mailed to all charge customers at the end of each month.

TERMS

I agree that **the 10th day of the month is the due date** of my account. I agree to pay in full on or before the 10th day of the month the current amount due as shown on my Omnisource United, Inc. account statement for all goods and/or services purchased and charged to my account during the billing period. If the account is not paid on or before the due date my account will be past due. If suit is brought on the account, or if the collection is attempted through probate, bankruptcy, or insolvency proceedings, I agree to pay a reasonable attorney's fee of no less than (10%) of the account balance plus late charges due at the time of suit or collection efforts, which is agreed to be a reasonable fee.

FINANCE/LATE CHARGES

I agree to charges of 1.5% per month on all past due balances – Annual Percentage Rate 18%.

On each returned N.S.F. (insufficient funds) to Omnisource United, Inc. I agree to pay the service charge in addition to the finance/late charges applied to my account.

SECURITY INTEREST AGREEMENT

I, the debtor, hereby grant Omnisource United, Inc., the secured party, a continuing security interest in all my inventory, equipment, machinery and tools, wherever located, now owned or hereafter acquired from whatever source along with all accounts receivable, chattel papers, contract rights, instruments sight drafts, cash, insurance benefits, general intangibles, right to payment of every kind, interest in any goods, the sale, the lease or disposition thereof, now or at any time hereafter arising out of the debtor's business to secure payment and any late or finance charges owed the secured party. I grant the secured party the right to repossess such inventory, equipment, machinery and tools by whatever legal means are available after the account becomes past due. I waive demand notice of intention to repossess, grace, or notice of default, and agree to indemnify, reimburse and hold harmless Omnisource United, Inc. from any and all actions, damages, expenses, costs, and attorney's fees incurred in the collection of my account and the enforcement of this security agreement. I agree to pay any expenses incurred in the repossession and care of any property under this security agreement in addition to all sums due on my account.

I, the debtor, hereby agree to give written notice of any change in my business entity prior to the change itself. Afore mentioned change would include, but would not be limited to, a change in legal ownership of debtor.

I agree that this document may be filed as a financing statement.

Signed this _____ day of _____ 20____

DEBTOR

SECURED PARTY

Company Name

Omnisource United, Inc.

Company Name

Address

Address

City, State, Zip

City, State, Zip

X

Signature of Authorizing Officer or Partner

X

Signature

X

Signature of Partner

Title



806-373-2592 Fax 806-379-9728 P.O. Box 9138 Amarillo, TX 79105-9138
Toll Free 888-326-7072

Date _____

I, _____ hereby authorize Omnisource United to pull a personal credit report to use in the evaluation of my request for extension of credit for the following business:

(Business Name)

Social Security Number _____

Current Address _____

Signature: _____ (required)

**Amarillo Billings Commerce Dallas El Paso Farmington Houston Laredo Las Vegas
McAllen Phoenix Riverside Salt Lake City San Antonio Tucson Waco Wichita Falls**

BANK REFERENCE

Date: _____

Bank Name: _____

Bank Address: _____

Bank Account # _____

Name(Print) _____

I the undersigned hereby request the release of information concerning my account(s) to OMNISOURCE UNITED, INC.

(Signature)

Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit	Phone (Area code and number)											
Address (Street & number, P.O. Box or Route number)												
City, State, ZIP code												
Texas Sales and Use Tax Permit Number (must contain 11 digits)												
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>												
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico												
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 40%;"><i>(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)</i></td> </tr> </table>			<i>(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)</i>									
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I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:

Seller: OMNISOURCE UNITED INC.

Street address: _____

City, State, ZIP code: _____

Description of items to be purchased on the attached order or invoice:

Tires & Accessories


Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

Same as above

The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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This certificate should be furnished to the supplier.
Do not send the completed certificate to the Comptroller of Public Accounts.