

Dear Customer:

Thank you for your interest in Wilco Supply for your rainware products. This packet contains information on your payment options for your orders with Wilco Supply. You may establish a credit account or pay by cash, check, debit, or credit card on delivery.

Credit Account

If you would like to establish credit with Wilco Supply, please complete the enclosed Credit Application and Agreement. Our credit terms are Net 30 days. The application may be returned to us by mail, fax to 317-781-5463, or e-mail to brenda.herner@wilcosupply.net. Once your completed application is received, we will review your information and make inquiries to your references. When all information has been received, we will contact you to let you know of your approved credit limit. It can take some time to receive this information, so it may be necessary to use another method of payment for your first order.

Also enclosed is a **Purchase Order Authorization** so you can inform us who is authorized to place orders on your account.

Pay by check on delivery

If you would like to pay by check at time of delivery, we will need to have the following bank account information to keep on file **prior to your first payment by check:**

The name on the bank account
Your driver's license number if it is a personal bank account
Your land line telephone number
Your bank name
Routing number
Account number

You will be contacted the afternoon before your delivery to let you know your invoice total. We ask that, if possible, you contact us prior to your delivery to let us know your check number.

Pay by debit or credit card on delivery

If you would like to pay by debit or credit card at time of delivery, we have the ability to keep your card number on file to simplify your future payments. The numbers are saved on our system in a secure encrypted form.

We ask that you call us prior to your first order to give us your card number, expiration date, verification code, and to verify the billing address of your card. Enclosed you will find a **Credit Card Payment & Purchase Order Authorization Form**. Please complete this form to give us authorization to use your card for all of your purchases. On this form you may also let us know the individuals that are authorized to make purchases for you.

If you do not wish to keep your card information on file, please give the information to us when you place your order.

If you have any questions regarding these payment options, please feel free to call me.

Thank you,

Brenda L. Herner

Accounting Manage

P.O. Box 33549 Indianapolis, IN 46203-Tel 317/781/5464

Fax 317.781.5469

www.wilcosupply.net



CREDIT APPLICATION AND AGREEMENT

	CREDIT	APPLICATION AND AGI	NEEWIEN I	Date//	
	pplication must be com	pleted in full and signed by a d by: (Please print)	a corporate officer, pa		
Company Name					
		City		State	
Zip	Telephone	Fax	Cell		
E-mail Address		Month/Year Business Started			
Type of Business		Tax	Tax I.D. Number		
) Corporation Par	tnership () Proprie	etorship () Limited Partr	nership () Othe	r	
would prefer to red	ceive my invoices and s	tatements by: () Mail () Fax () E-mai	1	
Line of credit desire	ed? \$				
Names of Owners,	Partners, or Officers:				
Name	Title	Residence Address	Phone	Social Security #	
	105	est:		_	
	145			-	
Bank Reference:					
Name of Bank			Phone		
Branch Address			Fax		
Loan Officer		Bank Credit Line	Secured?	Yes No	
ersonal Guaranty	Yes No	Explain			
) Checking A	Account Number				
) Savings Ac	count Number				
) Loan Acco	unt Number				
endor References	:				
lame	Address		Phone/Fax		
			-		

TERMS AND CONDITIONS

It is agreed that buyer will pay in full within 30 days from date of invoice. In the event such payment is not timely made, buyer agrees to pay on all delinquent invoices interest at the rate of 1.75% (21% APR) together with any court costs and attorney's fees of not less than 25% of the unpaid amount of principal, interest, and costs of collection the seller may incur in enforcing the terms of this agreement, all without relief from valuation and appraisement laws. If legal action becomes necessary by either seller or buyer, it is agreed that this or any contemporaneous or subsequent agreement shall be governed as to validity, interpretation, construction, effect, and in all other respects by the laws of the State of Indiana, and jurisdiction and preferred venue shall be in Indianapolis, Marion County, Indiana.

The buyer further grants to the seller a security interest in buyer's equipment, contract rights, inventories, receivables, and proceeds of sales as collateral to secure the buyer's performance of all obligations. The buyer further authorizes the seller to file a financing statement without buyer's signature.

The buyer agrees to notify Wilco in writing of any changes to your business or changes in authorized personnel.

The buyer authorizes Wilco to contact any consumer reporting agency, all banks, credit, and trade references listed herein at any time to verify your credit standing and, hereby authorize them to release said information to Wilco.



CREDIT CARD/PURCHASE ORDER AUTHORIZED USERS

ompany Name:
Company Address:
Company Phone Number:
Main Contact: Contact Title:
state that I am over the age of eighteen, and am duly uthorized on behalf of (company name) to grant the ollowing individuals authorization to present credit cards or purchase orders to Wilco for the urchase of materials on behalf of (company name):
1. 2. 3. 4.
agree to notify Wilco in writing at P.O. Box 33549, 1535 E. Naomi Street, Indianapolis, IN 6203, attn A/R department, of any changes to the above list of authorized individuals.
Company Name)
igned Name: rint Name: itle:





CREDIT CARD PAYMENT & PURCHASE ORDER AUTHORIZATION

Company Name:
Company Address:
Company Phone Number:Company Fax Number:
Main Contact: Contact Title:
I,, state that I am over the age of eighteen, and am duly authorized on behalf of (company name) to grant Wilco Supply, Inc. authorization to use the credit card on file for our company to pay for all of our purchases.
I,, state that I am over the age of eighteen, and am duly authorized on behalf of (company name) to grant the following individuals authorization to present purchase orders to Wilco for the purchase of materials on behalf of (company name):
1
I agree to notify Wilco in writing at P.O. Box 33549, 1535 E. Naomi Street, Indianapolis, IN 46203, Attn: A/R Department, of any changes to the above authorizations.
(Company Name)
Signed Name: Print Name: Title: Date:

