

HARRELL'S

CAR WASH SYSTEMS®

1339 Country Club Road
Indianapolis, IN
46234-1820

Office: 317-271-0017
Fax: 317-271-2780
Toll Free: 800-274-2777

Account Number : _____
Chemical Sales Person : _____

New Account Application

We welcome your interest in doing business with Harrell's Car Wash Systems. For your convenience and to serve you more efficiently, we encourage establishment of an open account. All information submitted will be held in the strictest confidence and used solely to determine your line of credit. Please allow us a minimum of two weeks for processing.

1. General Information

Firm Name (If Proprietorship, full name of owner) : _____

Wash name : _____

Billing Address : _____

Billing City : _____ Billing State : _____ Billing Zip : _____ Billing Phone : _____

Delivery Address : _____

Delivery City : _____ Delivery State : _____ Delivery Zip : _____ Delivery Phone : _____

Email : _____

Legal Status (Check One) : Proprietorship Partnership LLC LLP Incorporated in the state of _____ Date : _____

Federal Tax ID Number (SSN if sole proprietorship) : _____

Year Established : _____ At Present Location Since : _____

Parent Company : _____

Contact Person : _____ Contact Title : _____

Contact Phone : _____ Contact Email : _____

Accounts Payable Contact : _____ Title : _____ Email Address : _____ Phone : _____

2. Officers/Owners/Partners

Name :	Title :	Email:	Phone :
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you requesting credit terms? If yes move to step 3. If no you will be Cash on Delivery (COD) and move to step 5. Yes No

3. Trade References: (Please indicate below firms from which you are currently purchasing on an open account)

Name :	Email :	Phone :
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Bank Reference (only need to complete if Credit Terms Requested):

Name : _____ Branch : _____ Officer : _____
Address : _____
City : _____ State : _____ Zip : _____ Phone : _____
Checking Account # : _____ Savings Account # : _____ Loan Account # : _____

5. Purchasing Information:

Amount of Credit Desired (\$0 if COD): \$ _____ Opening Order : \$ _____
Estimated Annual Purchases from Harrell's Car Wash Systems : \$ _____ Tax Exempt # : _____

**If Tax Exempt, please enclose a General Sales Tax Exemption Certificate.
Please be sure to fill in the RRMC No. and sign your name.**

TERMS AND CONDITIONS

- Applicant is hereby advised that our regularly stated terms are thirty (30) days net, unless otherwise pre-arranged with the credit department. Applicant hereby agrees to pay a service charge of 1-1/2% per month (18% A.P.R.) on all overdue accounts. Should it become necessary for Harrell's Car Wash Systems (hereinafter "Harrell's") to file suit to enforce payment of any charges, applicant agrees hereby that such suit may be brought in Marion County, State of Indiana, at seller's option, and seller shall be entitled to court costs, attorney fees, and interest at the highest allowable rate on all amounts found to be due and payable. All subsequent purchases are deemed made and payable at Harrell's Car Wash Systems 1339 Country Club Road, Indianapolis, IN 46234-1820.
- All accounts 45 days overdue will be placed on C.O.D.
- Credit deductions from any invoice are not permitted without prior authorization.
- Taxes: Unless otherwise noted, prices are subject to any tax imposed by Federal, State, and local laws.
- Minimum Order \$20.00. All returned checks subject to a \$50.00 service charge.
- The failure of Harrell's to exercise any right or remedy hereunder shall not prevent Harrell's from exercising such right or remedy in the future.

FREIGHT

- All shipments will be shipped Freight Collect or Third Party Billing.
- All UPS, RPS, FED EX, etc. shipments will be prepaid and added to the invoice, unless instructed otherwise.
- All deliveries by Harrell's trucks or employees by agreement or contract.
- Claims for shortages and damages must be filed against the Carrier by the receiver, who is responsible for inspection of the merchandise as it is unloaded.

RETURN OR REPAIR OF GOODS

Harrell's shall not accept return of goods without prior written authorization, and reserves the right to charge a 15% handling charge. Harrell's may refuse to accept returned goods even if previously authorized, if, in Harrell's opinion, the goods are not in the same condition as shipped to Customer or if the cost of shipment is not prepaid by the Customer. If Customer claims the goods are nonconforming, Customer must notify Harrell's within five (5) days of delivery date. Harrell's may elect to replace or repair any nonconforming goods as its sole responsibility. Harrell's shall charge Customer for any field labor required to effect repairs to equipment which are not to be covered under the manufacturer's warranty. Acceptance of returned goods, and repair or replacement thereof, or credit for the costs thereof, shall constitute full settlement of any claim by Customer for damages, and shall constitute a full release of Harrell's with regard to the sale, and Harrell's shall not be responsible for any consequential damages. A prior decision by Harrell's to accept returned goods does not constitute a binding obligation to accept return of future goods.

LIMITATION OF WARRANTIES

Harrell's is not the manufacturer or designer of the goods sold. Harrell's makes no warranty, expressed or implied, of any kind and Harrell's expressly disclaims all warranties of merchantability and fitness for a particular purpose. Under no circumstances shall Harrell's be responsible for incidental or consequential damages, arising from or in connection with the use of the goods sold herein. Harrell's sole obligation shall be to assign to purchaser any and all warranties offered by the manufacturers of the goods sold herein. I hereby certify the foregoing to be true to the best of my knowledge. I agree to the above terms and conditions. I have retained a copy of this agreement for my records. I further authorize the above cited references to supply pertinent information as may be requested to determine our credit capabilities.

Print Name : _____ Title : _____

Signature of applicant(s) required _____ Title _____ Date: _____
I/We for and in consideration of your extending credit at my/our request to _____ (herein referred to as the "Company"), hereby personally guarantee to you the payment of any obligation of the Company and I/We hereby agree to bind myself/ourselves to pay you on demand any sum which may become due to you by the Company including attorney fees. It is understood that this guaranty shall be continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I/We do hereby waive notice of default, nonpayment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

Signature : _____ Date : _____ Email : _____

Signature : _____ Date : _____ Email : _____

Address of Guarantor if different from above : _____

Phone : _____

In case of partnership all partners must sign application.

Please attach a completed General Sales Tax Exemption Certificate before returning application.

Thank You. We look forward to serving you.