



Credit Application

htccreditapQE12.98

Hogan Tire - A/R
PO Box 2235
Woburn, MA 01888
fax: (781) 935-1637

Business name _____ Type of Business _____
Parent company if subsidiary _____ Years in business _____
Mailing address _____ City _____ State _____ Zip _____
Street address _____ City _____ State _____ Zip _____
Phone(_____) _____ Fax(_____) _____ e-mail _____

Type of ownership: proprietorship partnership corporation government non-profit

PERSONAL INFORMATION:

Name of owner _____ Social security number _____
Home address _____ City _____ State _____ Zip _____
Name of co-owner _____ Social security number _____
Home address _____ City _____ State _____ Zip _____
Estimated monthly purchases (\$) _____ Purchase order required: yes no
Special billing instructions? _____

TRADE REFERENCES: *please only list references you have done business with for more than one year.*

1.Name _____ Fax(_____) _____ Acct No. _____
Address _____ City _____ State _____ Zip _____
2.Name _____ Fax(_____) _____ Acct No. _____
Address _____ City _____ State _____ Zip _____
3.Name _____ Fax(_____) _____ Acct No. _____
Address _____ City _____ State _____ Zip _____

BANK REFERENCE:

Name _____ Phone(_____) _____
Account No. _____ Account officer _____
Address _____ City _____ State _____ Zip _____

CREDIT AGREEMENT-TERMS AND CONDITIONS:

It is agreed that all charges are due and payable on the 10th of the month following purchase. All past due amounts are subject to a service charge of 1.5% per month, which is an annual percentage rate of 18%. Applicant shall pay all reasonable attorney fees, court costs and disbursements incurred by Hogan Tire Centers, Inc. ("Hogan Tire") to collect any balance due on this account. Applicant authorizes Hogan Tire to conduct credit investigation of, and to obtain credit reports on, applicant, and to make credit reports on applicants account. Applicant agrees that the terms and conditions of this agreement and Hogan Tires invoices and statements shall prevail in the event of any conflict with those contained in any purchase order or other form submitted at any time by Applicant.

Authorized signature _____ Name (print) _____
Title _____ Date _____

If business is a proprietorship, partnership or corporation of less than 3 years, or if you are unable to supply three trade references of 1 year, the following must be completed by owner, general partner or officer of the company.

PERSONAL GUARANTEE:

In consideration of the credit purchases from Hogan Tire Centers, Inc. ("Hogan Tire") under the Hogan Tire Credit Agreement ("Agreement") above, the terms of which incorporated by reference and made part of this Application, the undersigned hereby agrees to unconditionally personally guarantee payment of all amounts due under, and performance under the terms of, the Agreement, and further agrees to pay the total balance due on the Account opened pursuant to the Agreement upon demand, without requiring Hogan Tire to proceed first to enforce payment against the business entity also liable on the Account, in the event of any default under the Agreement which governs the Account. The undersigned hereby waives any notices regarding the Agreement and agrees that this personal guarantee shall be applicable for as long as the Agreement and Account shall be operative.

First name _____ Mid Initial _____ Last name _____ Social Security# _____
Home address _____ City _____ State _____ Zip _____
Home phone(_____) _____ Personal Guarantor's Signature _____ Title _____