



1212 65th Street · Rosedale, MD 21237 · (Phone) 410-866-0100 · (Fax) 410-866-0171 · (Toll Free) 866-666-7278

ACCOUNT APPLICATION

A SIGNATURE IS MANDATORY PRIOR TO RECEIVING AN ACCOUNT.

Company Name: _____
 Contact Name: _____
 Billing Address: _____
 City: _____ State: _____ Zip: _____
 Shipping Address (If different): _____
 Phone Number: _____ Fax Number: _____
 Email: _____ Shipping Notification Email: _____
 Website: _____
 Type of Account Requested: _____ C.O.D. _____ Credit Card _____ 30-Day Terms
 Type of Company: ___ Corp. ___ Partnership ___ Proprietorship How long have you owned the business? _____
 List All Owners & Percentage of Ownership: _____
 Federal ID or Social Security Number: _____ Resale Certificate Attached? _____
 Please attach most recent year-end and quarterly corporate or personal financials. Attached? _____

BANK INFORMATION

Bank Name/Branch: _____ Phone: _____
 Street Address: _____ City: _____ State: _____ Zip: _____
 Account Number: _____ Contact Person: _____

TRADE REFERENCES

Company Name: _____ **Contact Person:** _____
 Address: _____
 Phone Number: _____ **Type Of Business:** _____
Company Name: _____ **Contact Person:** _____
 Address: _____
 Phone Number: _____ **Type Of Business:** _____
Company Name: _____ **Contact Person:** _____
 Address: _____
 Phone Number: _____ **Type Of Business:** _____
Company Name: _____ **Contact Person:** _____
 Address: _____
 Phone Number: _____ **Type Of Business:** _____

The above information is submitted by the undersigned for the purpose of obtaining credit. The undersigned authorizes Red Hawk, LLC to whom this application is made to investigate the references listed pertaining to my/our credit and financial responsibility and expressly agrees to make payment in full to you for all purchases in accordance with your invoice(s). Should the undersigned default in any such payment, the undersigned expressly agrees to pay a service charge (late charge) of 1.5% per month (18% per annum) or the maximum rate permitted by law on any amounts in default, and, at your option, all amounts owed to you by the undersigned shall become immediately due and payable. The undersigned shall be responsible for attorney's fees equal to 25% of the full balance owing plus all other costs and expenses incurred by you in the collection of any obligation of the undersigned pursuant hereto.

In the event of default, the undersigned authorizes any attorney of a court of record to appear for me/us and to confess judgment against me/us for the full balance owing to you, including principal, interest and attorney's fees. The undersigned further agrees that should Red Hawk assign any accounts the undersigned expressly waives any right of offset against the assignee for the accounts so assigned. This agreement shall become effective when accepted by our authorized representative. The undersigned agrees that the laws of the State of Maryland shall govern this agreement and any transactions between you and the undersigned. In the event of a dispute, personal jurisdiction and venue shall be in Baltimore County, Maryland. The undersigned shall not transfer or assign this agreement without the prior written consent of Red Hawk, LLC.

SIGNED: _____ **DATE:** _____
PRINTED NAME: _____ **TITLE:** _____

If a corporation, the signature must be that of an officer, stating title.