



## 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.