

JULES BOREL & COMPANY
1110 GRAND BLVD., KANSAS CITY, MO 64106
(816) 421-6110 Fax: (816) 421-2596 mail@julesborel.com
www.julesborel.com

APPLICATION FOR OPEN ACCOUNT
Please Print or Type

Date: _____

Name under which you will order:

Business Phone: _____ Fax: _____ E-mail: _____

Business Address: _____
street city state zip-plus 4

Name of Owner: _____ Social Security No: _____

Home Address: _____
street city state zip-plus 4

Expected Credit Limit Needed: _____ State Sales Tax No. _____

List firms from whom you now buy on open account. (May include local merchants, credit cards, etc.) We regret that it will not be possible to process your application unless COMPLETE NAMES, ADDRESSES, PHONE NUMBERS, AND ACCOUNT NUMBERS ARE GIVEN.

Name and Address of Bank Reference:

Name and Address of closest relative NOT living with you:

IMPORTANT: READ CAREFULLY BEFORE SIGNING THIS APPLICATION

In consideration of BOREL opening a line of credit based on the above information, the undersigned promises to pay for all purchases in accordance with BOREL'S terms of sale. If, for any reason, the undersigned is unable to pay for said purchases when due, the undersigned agrees to pay 1.5% monthly interest on the past due portion of the balance. Should BOREL incur collection costs for any amount. due under this agreement, the undersigned promises to pay such additional costs, including reasonable attorney's fees.

TITLE: _____ SIGNED: _____
(owner-partner -president)