

# OPEN ACCOUNT PAYMENT AGREEMENT

Business Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

- If Partnership or Proprietorship, name and home address of Owner:  
 If Corporation, name and address of Registered Agent:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

How long in business under stated name: \_\_\_\_\_  
Person to speak with regarding payments: \_\_\_\_\_ Title: \_\_\_\_\_



925 DENISON AVENUE  
NORFOLK, VA 23513  
(757) 857-1946  
800-876-8321  
FAX (757) 855-5120  
TOLL FREE FAX (888) 855-5120

## TRADE REFERENCES

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## BANK REFERENCES

Name: \_\_\_\_\_  
Account No.: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Bank Contact: \_\_\_\_\_

Approximate monthly thermography usage?  
\_\_\_\_\_

## THE APPLICANT AGREES TO THE TERMS AND CONDITIONS OF THE BUSINESS CARDS TOMORROW OPEN ACCOUNT AGREEMENT AS FOLLOWS:

1. Full Payment is due on each Monday for products delivered the previous week unless other terms are arranged.
2. An open account is offered to those customers who will average one hundred dollars (\$100.00) or more per month in charges.
3. All legal fees, court costs, attorney's fee (30%), and collection fees will be paid by the applicant, in case of default on the terms of this agreement.
4. Any monies that are pursued in court will be litigated in Norfolk, Virginia.
5. Interest will be paid to Business Cards Tomorrow, at the rate of one and a half percent (1½%) per month on all money due Business Cards Tomorrow which is not paid in accordance with agreed terms.
6. All work and services performed by Business Cards Tomorrow shall not pass totally to the applicant until all money due to Business Cards Tomorrow is paid in full.
7. A Twenty dollar (\$20.00) service charge will be charged on all returned checks.
8. The applicant hereby gives permission to disclose its experience with the bank indicated above to Business Cards Tomorrow. This information is to be used in consideration of granting an open account to the applicant.

### ACCEPTANCE OF TERMS AND CONDITIONS AS HEREBY SET FORTH BY AUTHORIZED PERSON.

*If corporate account, the undersigned officer personally guarantees payment of any indebtedness by applicant to Business Cards Tomorrow as an inducement for the extension of credit.*

Authorized Signature: \_\_\_\_\_ Home Address: \_\_\_\_\_  
SSN: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY:

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Open Account Limit: \_\_\_\_\_  
Comments: \_\_\_\_\_