



MSI BUILDING SUPPLIES

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COMMERCIAL CREDIT APPLICATION

Please fill in completely and print clearly

Date: _____

Company Name: _____ E-mail: _____

Phone Number: _____ Mobile: _____ Fax: _____

Physical Address: _____

Mailing Address: _____

State

Zip Code

Principal's Name: _____ E-mail: _____

Phone Number: _____ Mobile: _____ Fax: _____

Home Address: _____

Type of Business: Corporation ☐ Partnership ☐

Business License #: _____ EIN: _____

Premises: Owned ☐ Leased ☐

List collateral to be used: _____

Name of Bank: _____ Account Number: _____

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List the names of firms with which you have established credit:

Firm: _____ Phone Number: _____

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The above information is warranted to be true and is given for the definite purpose of obtaining credit. I hereby authorize the credit granter to verify without liability all of the statement herein.

Payment of accounts will be made upon receipt of billing unless otherwise agreed to in writing by the credit granter. Accounts not paid within thirty days will be considered past due. Accounts more than thirty days past will be temporarily suspended. Revocation of charging privileges is at the discretion of the credit granter. It is agreed that past due charges will be subject to a 1% monthly service charge. Should the amount due at any time be placed with a third party for collection it is agreed that charges incurred to effect collection of any amounts due will be paid by the applicant.

I hereby personally guarantee the payment of the account hereby applied for together with all terms and conditions referred to above.

Customer Signature

Please print name

Accepted by: _____ Customer #: _____ Credit Limit Authorized: _____ Date Opened: _____

MSI POLICY

Please read carefully before requesting credit.

MSI is hereby authorized to verify your credit information without liability. If an account is established for you, it will be subject to a credit limit determined by MSI. **A copy of the building permit for the current project must be provided if a credit limit in excess of \$2,000.00 is requested.**

Amounts charged are due in full upon receipt of MSI's statement. Statements are sent monthly. Accounts not paid within thirty (30) days of the statement will be considered past due and will be subject each month to a late payment charge of 1% of the amount unpaid. All costs of collection, including but not limited to, fees and charges of any third party retained by MSI for purposes of collection, shall be paid by applicant.

Accounts not used for six (6) months will be closed. Subject to MSI's approval, these accounts may be re-opened by calling the office. Accounts that do not reach a total of \$2,400 in charges for one year will be closed. Accounts with a valance 60 days past due will be closed and will not be re-opened until paid in full.

You hereby grant MSI a security interest in the collateral listed above, if any, as security for your obligations to MSI. You agree to execute any additional documentation required to perfect MSI's security interest, and to pay the costs and fees required.

YOU AND MSI HEREBY WAIVE TRIAL BY JURY IN ANY ACTION ARISING OUT OF OR RELATING IN ANY WAY TO THIS APPLICATION; MSI'S DECISION TO EXTEND, OR NOT TO EXTEND, CREDIT; OR THE CREDIT RELATIONSHIP BETWEEN YOU AND MSI, IF ONE IS ESTABLISHED.

By my signature below, I agree to the above terms and conditions and to pay all amounts charged by me, pursuant to the terms of this application.

Customer Signature

Date

List the names of persons authorized to sign on the account:

1. _____ 3. _____
2. _____ 4. _____

If you would like an invoice automatically faxed to you at the time of purchase, please provide fax number: _____