

ADVERTISING WILL BE PRE-PAID UNTIL CREDIT IS APPROVED

The Norwood Record Newspaper

661 Washington Street • Suite 301 • Norwood, MA 02062

Tel: (781) 769-1725 • Fax: (781) 501-5611

APPLICATION FOR CREDIT

Company Name _____

Business Address _____

Billing Address If Different _____

Business Telephone _____ Type of Business _____

Year Established _____ Year Incorporated _____

Type of Ownership ___ Corporation ___ Partnership ___ Individual

Name(s) of Proprietor/Partner, if a corporation President/Treasurer:

Name _____ Social Security Number ____ - ____ - ____

Residence _____ Phone Number _____

Name _____ Social Security Number ____ - ____ - ____

Residence _____ Phone Number _____

Individual to contact regarding payment _____

Individual to be ordering advertising _____

Business/Banking References:

Name _____ Branch _____ Type of Acct. & No. _____

Address _____

Name _____ Branch _____ Type of Acct. & No. _____

Other Business/Trade References/Advertising Media with which you have established credit:

1. Co. Name: _____ Address _____ Acct.# _____

2. Co. Name: _____ Address _____ Acct.# _____

3. Co. Name: _____ Address _____ Acct.# _____

I understand that all charges are due and payable within 15 days of receipt, and that charges not paid within 30 days are subject to a late payment charge of 1% per month. I agree to pay all court costs and collection costs, including reasonable Attorney's fees, in the event of default.

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledge and understand that you are relying on the information providing herein in deciding to grant or continue credit or to accept guaranty thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement of (2) in the financial condition of any of the undersigned or (3) in the ability of any to the undersigned to perform its (or their) obligations to you. You are authorized to make all inquires you deem necessary to verify the accuracy of the information contained herein, and to determine the credit worthiness of the undersigned. Each of the undersigned authorizes you to answer any questions about your credit experience with the undersigned.

In order to induce The Norwood Record to extend credit to the above mentioned company, I hereby personally guarantee to pay any balance due to the The Norwood Record under the terms and conditions outlined above.

Date _____ Signature _____ Title _____

Salesperson _____