



DATE: _____

LOCATION: _____

MAIL, FAX OR EMAIL BACK TO:
TROPIC SUPPLY CREDIT DEPT.
1001 SAWGRASS CORPORATE PKWY.
SUNRISE, FL 33323
FAX: (954) 835.6002
CREDIT@TROPICSUPPLY.COM

NEW ACCOUNT FORM
Please print clearly. All 4 pages must be completed in full. Please allow two weeks for processing.

Company Name: _____ License #: _____

Name of Parent Company if Subsidiary: _____

Physical address: _____

City: _____ State/Zip: _____

Mailing address (if different from above): _____

City: _____ State/Zip: _____

Phone: _____ Fax: _____ Mobile: _____

Email: _____ Website: _____

Number of full time employees: _____ How long at present location: _____ Do you own or rent?: _____

Fed. Tax ID #: _____ Corporation Partnership Proprietorship

Has owner, partner or stockholders done business under a different name: Yes No

If yes, under what name: _____

Name and address of Principal Owners or Officers and their titles:

Name _____ Title _____ Address _____

Name _____ Title _____ Address _____

Name _____ Title _____ Address _____

Has applicant or any above officers filed for bankruptcy in the last 7 years? Yes No

Any Judgments, Liens or pending suits against you or your company? Yes No

If yes, please explain: _____

Type of business: HVAC Refrigeration Construction Svc. & Maintenance Export/Exporter

Is your business Tax Exempt? Yes No Florida Sales Tax #: _____

If yes, please submit the appropriate state approved certificate. State law requires us to charge and collect tax unless the sales tax certificate is on file in our office.

Is a Purchase Order required?: Yes No Ok to receive invoices by email: Yes No

If yes, provide email address (if different from above): _____

Estimated purchases in a thirty (30) day period: \$ _____ Accounts Payable contact: _____

Check the Resource Center(s) where you will make the majority of your purchases:

- Cape Coral
- Ft. Lauderdale
- Jacksonville
- Orlando
- Sunrise
- Daytona Beach
- Ft. Myers
- Miami
- Port Charlotte
- Tampa
- Delray Beach
- Ft. Pierce
- Naples
- Sarasota
- Tallahassee
- W. Palm Beach
- Ocala

Please provide latest financial statement available.

REFERENCES

Please print or type complete mailing address

TRADE

Name: _____

Address: _____

City/State/Zip: _____

Account #: _____ Email : _____

Phone: (_____) _____ Fax: (_____) _____

TRADE

Name: _____

Address: _____

City/State/Zip: _____

Account #: _____ Email : _____

Phone: (_____) _____ Fax: (_____) _____

TRADE

Name: _____

Address: _____

City/State/Zip: _____

Account #: _____ Email : _____

Phone: (_____) _____ Fax: (_____) _____

TRADE

Name: _____

Address: _____

City/State/Zip: _____

Account #: _____ Email : _____

Phone: (_____) _____ Fax: (_____) _____

BANKING

Name: _____

Address: _____

City/State/Zip: _____

Cust. #: _____ Email : _____

Phone: (_____) _____ Fax: (_____) _____

PLEASE READ CAREFULLY

The person, corporation or firm, whose name appears in these documents, and to whom an open line of credit is extended, will be governed by the following:

1. Permission is granted as evidenced by my (our) signature(s) below, for Tropic Supply, Inc. or its agents to contact the references listed hereon, or any other source for the purpose of obtaining credit information. That the creditor, bank, or lending institution contacted has my (our) permission to furnish Tropic Supply with any and all information requested.
2. Payments will be made in accordance with the terms stated on each invoice.
3. The applicant agrees to pay a service charge of 1.5% per month on any unpaid balance after 30 days.
4. A \$30 handling charge is assessed to all returned checks.
5. In the event credit is extended, Tropic Supply will be pleased to service your special order needs but please be aware that special orders cannot be cancelled or returned. Special orders may impact any available credit line at the time of placement. Tropic Supply may also require a deposit or pre-payment on such orders.
6. The Applicant agrees to notify Tropic Supply of any changes in ownership, officers, company name or manner in which the business operates. Notice to be given by certified mail, return receipt requested, upon Tropic Supply at the address indicated on page 1. Any existing personal and/or company liability shall continue for the account balance before said notice is received.
7. The customer hereby waives any right to claim consequential damages for any reason. In the event any material is defective, Tropic Supply will replace or credit said defective material according to its formal Warranty Policy of which applicant may request a copy at any time.
8. The customer acknowledges and agrees that it will be their responsibility to inform Tropic Supply, in writing, when an individual who was previously allowed to make purchases on their account is no longer employed or no longer authorized to use the account.
9. In the event that litigation or legal proceedings are instituted, the person, the firm or corporation to whom an open account was extended agrees to pay the expense of all legal proceedings, including court costs and attorneys fees on both the trial level and on appeal. The applicant further agrees that in the event of litigation that venue will be proper in Broward County, Florida, or in any county designated by Tropic Supply at its option. The applicant hereby freely and voluntarily consents to this venue provision.
10. In order for our credit department to process this application, all information requested must be supplied in full. Actual signature(s) are required.

Signature(s) of Officer, Partner or Owner

Signature	Social Security #	Title	Date
Signature	Social Security #	Title	Date
Signature	Social Security #	Title	Date

JOINT PERSONAL GUARANTY

In order to induce Tropic Supply, Inc, (hereinafter referred to as "Tropic"), its successor, endorsees and assigns, to extend credit to

_____ (hereinafter, whether one or more, referred to as "Company"), and for other good and valuable considerations, the receipt of which is hereby duly acknowledged, the undersigned (hereafter, whether one or more, referred to as "Guarantor") hereby jointly and severally guarantee to "Tropic", its successors, endorsees and assigns, the prompt and unconditional payment of any and every obligation or liability of "Company" to "Tropic", whether or not such liabilities are represented by instruments in writing and whether contracted by "Company" alone or jointly with others.

"Guarantor" consents that, without notice to or further assent by "Guarantor", the obligation of "Company" or of any other party for the liabilities hereby guaranteed may be renewed, extended, modified or released by "Tropic", as it may deem advisable, without impairing or affecting the obligations of "Guarantor", hereunder.

"Guarantor" waives any and all notice of the acceptance of this guarantee, or of the creation, renewal, or accrual of any obligations or liabilities of "Company" to "Tropic", present or future, or of the reliance of "Tropic" upon this guarantee. Any and every obligation or liability of "Company" to "Tropic" herein described shall conclusively be presumed to have been created, contracted, or incurred in reliance upon this guarantee and all dealings between "Company" and "Tropic" shall likewise be presumed to be in reliance upon this guarantee. "Guarantor", "Company" or any other party liable for any of "Company's" obligations hereby guaranteed.

All obligations or liabilities of "Company" and/or "Guarantor" to "Tropic", shall without notice or demand, become immediately due and payable upon the default of "Company or Guarantor" with respect to any obligations or liabilities or either of them to "Tropic"; or in case "Company" or any "Guarantor" shall die or become insolvent or make an assignment for the benefit of creditors; or if a petition in bankruptcy be filed by or against "Company" or any "Guarantor"; or in the event of the appointment of a receiver of "Company" or any "Guarantor"; or in the event that a judgment is obtained or a writ of attachment is issued against "Company" or any "Guarantor"; or in the event of the disposition, merger, consolidation or reorganization of "Company" or "Guarantor".

The "Guarantor" hereby jointly and severally agrees to pay "Tropic" on demand any such sum which may become due to "Tropic" by the "Company" whenever the "Company" shall fail to pay the same plus all costs of collection in enforcing this guarantee including, but not limited to, outstanding service charges, reasonable attorney's fees, including any appeals. It is understood and agreed by "Guarantor" that this guarantee shall be of a continuing nature and is irrevocable.

Any action brought by any party against any other party or parties to this Agreement on account of this Agreement or involving the subject matter of this Agreement shall be brought in Broward County, Florida. Since Broward County is the agreed venue for any such action, each party does hereby, waive any and all rights to be sued in any other county, other than Broward County.

This agreement shall without further reference, pass to, and may be relied upon and enforced by, any successor, endorsee or assignee of "Tropic". This agreement may be terminated (so far as related to new obligations of "Company") only upon written notice by Certified Mail, Return Receipt Requested. In the event of any termination (whether by such notice, death otherwise), "Guarantor" and his or their respective executors, administrators and assigns shall nevertheless remain liable with respect to obligations created or arising prior thereto. Permission is granted as evidenced by my (our) signature(s) below, for Tropic Supply, Inc. or its agents, to obtain my (our) personal credit report(s) from time to time for the purpose of obtaining personal credit information. The customer warrants that it will use all goods purchased under this account for business purposes and that the customer is not a consumer as defined by any applicable federal or state usury law or consumer protection law.

IN WITNESS WHEREOF, the undersigned have hereto set their hands and seals this _____ day of _____ 20_____.

WITNESSES AS TO GUARANTORS
SWORN TO AND SUBSCRIBED BEFORE ME

THIS _____ DAY OF _____ 20_____.

Notary Public State of Florida at Large

My Commission Expires: _____ (Seal)

Signature, individually as Guarantor (Seal)

Print Name

Social Security #

Signature, individually as Guarantor (Seal)

Print Name

Social Security #