

Holiday TinsTM & Containers

CREDIT APPLICATION

Thank you for your interest in Holiday Tins & ContainersTM. The following information will help speed the processing of your credit application.

- Please complete all information. Incomplete applications cannot be processed.
- Be sure to indicate an "Amount of Credit Requested."
- Your credit references should be ones in which your credit line and purchases are in line with the amount of credit requested from our firm.
- Credit References are ones in which you purchase from for your business on an open account basis. Utilities, bank accounts, credit cards (MasterCard®, VISA®, American Express®), UPS, FedEx, landlords, personal accounts, etc. are NOT considered trade references.
- The inclusion of FAX numbers of your credit references will help speed up the process.
- This is a legal document. It must be executed by an official officer and initialed where indicated on Page One, and signed on Page Two, and signed by an authorized signatory on your account on the Bank Release Form.

In general, it takes four to six weeks for the credit approval process to be completed. The responsiveness of your credit references may delay the process.

Please mail the completed application to:

Holiday Tins & Containers
PO Box 1351
Bellaire, TX 77402-1351

Or FAX to 1.800.749.5491.

Holiday Tins & ContainersTM

PO Box 1351
 Bellaire, TX 77402-1351
 www.holidaytins.com

713.666.200 or 1.800.749.9911
 FAX 713.666.3300 or 1.800.749.5491
 E-Mail: sales@holidaytins.com

CREDIT APPLICATION

About your business...

Customer Initials -> _____

Legal Name _____	Sole Proprietor <input type="checkbox"/>	Corporation <input type="checkbox"/>
DBA Name _____	Partnership <input type="checkbox"/>	Limited Partnership <input type="checkbox"/>
Physical Address _____	A/P Contact _____	
City, State, ZIP _____	Billing Address _____	
Telephone _____	City State, ZIP _____	
Date Established _____	FAX _____	
Type of Business _____		

<input type="checkbox"/> Homebased Business	Landlord/Lienholder _____	Phone Number _____
<input type="checkbox"/> Commercially Located Business	Mailing Address _____	Contact Name _____
	City, State, ZIP _____	Move In Date _____
Amount of Credit Requested \$ _____	Is a Purchase Order (PO #) required on all orders?	
How will your company use our products?	D&B # _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Resale to Retail, Primary Product _____		
<input type="checkbox"/> Resale to Wholesale/Trade, Primary Product _____		
<input type="checkbox"/> Resale to Retail, selling empty		
<input type="checkbox"/> Other _____		
If your company has a restricted "Authorized Buyer" list, please provide that information to us in writing.		

About the owners...

Owner(s)/Partner(s)/Officer(s) Information:				
Name	Home Address	Phone #		Position/Title
Ownership %				
Ownership %				
Ownership %				
Ownership %				

Attach an additional sheet if more space is needed.

About your commercial banking relationship...

Bank Name _____	Account #(s): _____
Mailing Address _____	_____
City, State, ZIP _____	Phone _____
Contact Name _____	FAX _____

About your commercial credit references...

Credit References: (Please provide five trade references in which you purchase on an open account basis that you have an established credit line)
 (Note that utilities, credit cards (MC/VISA/AMEX, etc), UPS, FedEx, landlords, personal accounts, are NOT considered trade references)

Vendor Name	Mailing Address	Phone Number	FAX Number*	Account #

* The inclusion of FAX numbers helps speed up the request for references.

Additional information...

TERMS AGREEMENT

The undersigned "Purchaser" agrees that all purchases made from Holiday Tins & Containers or any of its subsidiaries and affiliated entities "Seller" are subject to the following credit terms and conditions and that Purchaser understands that the seller will make its usual credit investigation and AUTHORIZES APPLICANT'S BANK and CREDIT REFERENCES TO RELEASE INFORMATION AS DESIRED BY HOLIDAY TINS & CONTAINERS:

- (1) All amounts due for goods and services purchased from Seller are payable at Seller's remittance address. Purchaser acknowledges that such amount are not payable installments, but are payable in full.
- (2) All amounts due Seller are payable in accordance with the payment terms granted by Seller's credit department. If any amount due Seller is not paid in accordance with such payment terms, a delinquency charge will be assessed at the rate of 1.5% per month (18% annual).
- (3) In the event the account is turned over to an attorney or other agency for collection, or suit is brought on same, or the same is collected through any judicial proceeding whatsoever, Purchaser shall pay all reasonable attorneys' fees, collection, and court costs incurred by Seller.
- (4) Purchaser shall notify Seller via Certified Mail of any change in ownership of Purchaser.
- (5) A 5% service charge will be added for any open account balance that is paid with a credit card.
- (6) Terms & Conditions regarding specific order issues are stated on on the Terms and Conditions section of our Price List.
- (7) Amounts due may be assigned or factored by Seller.
- (8) Purchaser warrants to Seller that all financial information furnished for the purpose of obtaining credit is true, correct, and complete in all material respects, and Purchaser authorizes Seller to investigate all references pertaining to the credit and financial responsibility of Purchaser.

"Purchaser" _____	("Purchaser Name")
By _____	Title _____
Signature _____	Date _____

Holiday Tins & ContainersTM

PO Box 1351
Bellaire, TX 77402-1351
www.holidaytins.com

713.666.200 or 1.800.749.9911
FAX 713.666.3300 or 1.800.749.5491
E-Mail: sales@holidaytins.com

BANK RELEASE

Bank Name _____	Account #(s): _____
Contact _____	_____
Mailing Address _____	_____
City, State, ZIP _____	Phone _____
	FAX _____
Bank Accepts Inquiries by: <input type="checkbox"/> FAX <input type="checkbox"/> Mail Only	
Account Styling _____	(the way your account is styled at your financial institution)
Requested By _____	(printed name, must be an authorized signer on the account(s))
Authorized Signature _____	Date _____

TO BE COMPLETED BY FINANCIAL INSTITUTION ONLY

Holiday Tins & Containers is requesting this information for the purpose of granting a commercial line of credit for the above referenced customer. Your reply will be held in strict confidence. Thank you for your assistance in this matter.

Date Account Opened _____

Current Funds on Deposit _____

Average Daily Balance _____

NSF Drafts in Past 12 Months _____

This information is merely a matter of opinion and is provided without responsibility to the financial institution or the writer thereof.

Prepared By _____

Title _____

Signature _____

Date _____