



356 Peachtree Street; Pelham, GA 31779

OFFICE: (229) 294-0600

TOLL FREE: (866) 891-8260

FAX: (229) 294-5798

Email: [bealltire@bealltire.com](mailto:bealltire@bealltire.com)

Website: [www.bealltire.com](http://www.bealltire.com)

(Official Use Only)

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

SALESMAN: \_\_\_\_\_

ROUTE #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

## NEW CUSTOMER/ CREDIT APPLICATION

(Please complete all portions of this application)

Select type of account you are applying for: \_\_\_\_\_ COD (check/ Cash); \_\_\_\_\_ Credit (financials and Guarantee are required)

Business Name: \_\_\_\_\_

Business address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing address \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ EMail: \_\_\_\_\_ @ \_\_\_\_\_

Ownership: \_\_\_\_\_ Proprietorship \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Other \_\_\_\_\_

List Principal Corporation Officers OR Business Owners

Name1 \_\_\_\_\_ Home address \_\_\_\_\_

Title: \_\_\_\_\_ Drivers Lic # \_\_\_\_\_

Name2: \_\_\_\_\_ Home address \_\_\_\_\_

Title: \_\_\_\_\_ Drivers Lic # \_\_\_\_\_

How long in business? \_\_\_\_\_ Type of business \_\_\_\_\_ Federal D# \_\_\_\_\_

Sales tax# \_\_\_\_\_ GA Scrap Tire# \_\_\_\_\_ PO# required? \_\_\_\_\_

Mount & Balance Tires? \_\_\_\_\_ Mounting/Balancing Machines On Hand? \_\_\_\_\_

Monthly Statements: Mailed USPS \_\_\_\_\_ E-mailed \_\_\_\_\_ Both \_\_\_\_\_

List firms with whom you do business and from whom we can obtain credit information

Company name \_\_\_\_\_ Phone \_\_\_\_\_ Contact \_\_\_\_\_

Company name \_\_\_\_\_ Phone \_\_\_\_\_ Contact \_\_\_\_\_

Company name \_\_\_\_\_ Phone \_\_\_\_\_ Contact \_\_\_\_\_

**BANK REFERENCES**

Bank \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Contact \_\_\_\_\_ Account# \_\_\_\_\_

Bank \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Contact \_\_\_\_\_ Account# \_\_\_\_\_

Amount of credit requested: \$ \_\_\_\_\_

**Applicant agrees to pay any collection costs incurred to collect the balance, including reasonable attorney's fees. The undersigned warrants that the information submitted is true and correct. Beall Tire Wholesale LLC is authorized to contact the credit references listed on this application and any other references that become available because of the credit review process.**

**If a line of credit is being requested, the undersigned is \_\_\_\_\_ willing \_\_\_\_\_ not willing to submit financial statements upon request?**

\_\_\_\_\_  
Name and Title

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

**In consideration of credit being extended by Beall Tire Wholesale to the above-named applicant for merchandise to be purchased (whether applicant is an individual(s), a proprietorship, a partnership, a corporation or other entity), the undersigned guarantor(s) each hereby contract and personally guarantee (which shall be construed to mean that the undersigned shall be personally responsible for payment of Applicant's debt to Beall Tire Wholesale in the event that Applicant fails to pay any debt – including past due amounts, attorney's fees and costs of collection – to Beall Tire Wholesale when due) to Beall Tire Wholesale the faithful payment when due of all accounts of said applicant for all purchases made after the date of this application or past due amounts on the same or other account with Beall Tire Wholesale.**

**The undersigned guarantor(s) each hereby expressly waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment, and demand for payment on applicant, protest and notice to undersigned guarantor(s) of dishonor of default by application or with respect to any security held by Beall Tire Wholesale extension of time of payment to applicant, acceptance of partial payment or partial compromise, all other notices to which the undersigned guarantor(s) might otherwise be entitled and demand for payment under this guarantee. Any revocation of this guarantee shall be in writing and delivered to Beall Tire Wholesale.**

**Applicant Name (please print):** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Witness Name (please print):** \_\_\_\_\_

**Witness or Notary:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_