



7208 Weil Avenue
St. Louis, Missouri 63119
800-635-2524
www.roofersmartinc.com

Upon Completion please turn in credit application to:

Robyn Taylor at **rtaylor@roofersmartinc.com** or 270-444-0149 (fax) for Cape Girardeau, Marion, Paducah, Barnhart, Caseyville, Springfield and Great American-Kansas City Branches

Alisha Switzer at **aswitzer@roofersmartinc.com** or 314-884-6262 (fax) for St. Louis Branch

CREDIT APPLICATION

Branch Location		Salesman	
Company Name		Date of Application	
Street Address	Phone #	Fax #	
City	State	Zip Code	

General Information

Principals

Owner, Partners or Officers		% of Ownership	Age	Title	Residence Address		
1	Name				Street		
	Social Security #				City	State	Zip
2	Name				Street		
	Social Security #				City	State	Zip

Authorized Buyers	Accounts Payable Contacts
1 _____	1 _____
2 _____	2 _____
3 _____	

Composition	Amount of Credit Desired
<input type="checkbox"/> Individual <input type="checkbox"/> Partnership	
<input type="checkbox"/> Corporation, State of: _____	\$ _____
Date Incorporated _____	

Credit Status

Credit is a privilege. It is an earned right and something to be proud of. We at Roofers Mart are equally proud of our credit privileges established with our suppliers. By our continued efforts to work together, we can mutually benefit and watch our companies grow. If you have any questions or concerns, please feel free to contact us as soon as possible. Your support is deeply appreciated.

Applicant's signature required on page 2, 3 and 4
All sales are subject to the Terms and Conditions specified herein.

NAME OF BANK

Bank Name			Bank Contact	Branch Name
Street Address			Phone #	
City	State	Zip	Type of Account and Account #	
Credit Line	<input type="checkbox"/> Unsecured <input type="checkbox"/> Secured		Secured By	

LIST OF PRINCIPAL SUPPLIERS

Name			Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Phone #		Account No.	Phone #		Account No.
Contact			Contact		

Name			Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Phone #		Account No.	Phone #		Account No.
Contact			Contact		



Construction Industries Credit Bureau
4774 South Spring
St. Louis, MO 63116
314-832-0764
314-832-2534 - fax

I hereby grant my consent for banks, suppliers, etc to release information to Construction Industries Credit Bureau.

SIGNED

FIRM

FEDERAL ID#

ACCOUNT NUMBERS

DATE

The applicant hereby acknowledges and agrees to the following terms and conditions of sale:

TERMS OF SALE	Terms given upon approval.
SERVICE CHARGES	All invoices not paid in accordance with terms printed on the invoice are subject to service charges calculated at 1-1/2% per month. All service charges are due upon receipt. Any service charges appearing on your statement of account are valid charges by Roofers Mart and payment of all such service charges is required to continue on open account status.
PAST DUE ACCOUNTS	Customers with prolonged unpaid balances will be subject to liens filed and/or any appropriate legal action that can be taken to protect the interest of Roofers Mart. Overdue and delinquent account balances are subject to being placed for collection and Buyer shall pay all expenses incurred including collection fees, court costs, and reasonable attorney fees.
NON-PAYMENT OF ACCOUNT	Customers with prolonged unpaid balances will be subject to liens filed and/or any appropriate legal action that can be taken to protect the interest of Roofers Mart. Overdue and delinquent account balances are subject to being placed for collection and Buyer shall pay all expenses incurred including collection fees, court costs, and reasonable attorney fees.
RETURNED CHECKS	All checks returned for insufficient funds or any other reason will be assessed a \$25 Accounting Charge, held for 10 days, then immediately processed with the County Prosecutor's Office!
RETURNED MATERIAL	No product or equipment of any kind shall be returned without prior approval.
RESTOCK CHARGE	Unless otherwise agreed, a restock charge of 15% will be assessed upon the return of products because of buyer ordering error.
JOINT PAYEE AGREEMENT	Joint Payee agreements are mutually beneficial for they do not apply against your credit line. Each job is established with a credit line and payment is then expected from the building owner which enables you to be paid on time.
LIMITED WARRANTY	Roofers Mart makes no actual warranty of its own but will pass through to its buyer the manufacturer's warranty to the extent that such warranty is provided. In the event the buyer discovers a product to be defective, Roofers Mart will assist the buyer in notifying the manufacturer of such defect. Roofers Mart makes no express and/or implied warranties whether of merchantability or fitness for any particular purpose or otherwise (except as to title) other than those expressly set forth above, and in no event does Roofers Mart assume, nor shall it be liable for CONSEQUENTIAL OR SPECIAL damages, or for installation adjustment or other expenses whether direct or indirect.

AUTHORITY FOR ROOFERS MART TO VERIFY INFORMATION

The undersigned, for the purpose of procuring, establishing and maintaining credit from time to time with Roofers Mart, has provided Roofers Mart with certain business and personal credit information as part of this Credit Application. The undersigned certifies that all information in this Credit Application is complete, factual and correct, and understands that Roofers Mart will rely on the accuracy of this information for any credit that may be extended. The undersigned hereby expressly authorizes Roofers Mart to contact any parties listed by the Buyer herein for the purpose of verifying any information contained in this Credit Application. The undersigned hereby waives any right of privacy which they may have in any such information and waives the effect and benefit of any statutes or regulations which gives them the right to control or bar the release of such credit information. Further, the undersigned hereby authorizes such parties to disclose Roofers Mart whatever information they may have with respect to the undersigned's credit or financial status and hereby agree to hold such parties harmless for any such disclosure.

The Undersigned hereby certify that they have read and agree to the above terms and conditions of sale and certify that the information submitted is true and correct.

X

President, Owner, or Partners

X

Chief Financial Officer

Date

CONTINUING GUARANTY

For value received, and for the purpose of inducing ROOFERS MART, INC. (hereinafter called the ("Creditor")) to extend credit or other financial accommodation, or to continue to extend credit of other financial accommodations to _____ (hereinafter called the ("Debtor")), the undersigned (whether one or more parties) hereby guaranties absolutely and unconditionally the prompt payment when due of any and all indebtedness of the Debtor to the Creditor. Such indebtedness of the Debtor may include all principal, interest, finance charges, attorneys fees and costs, whether direct or indirect, absolute or contingent, due or to become due, or whether such indebtedness is now existing or arises hereafter. In addition, if the Creditor seeks legal counsel to collect any amounts owed by the Debtor for any indebtedness or seeks to enforce this guaranty to any extent, in addition to the indebtedness, the undersigned agrees to pay all of Creditor's attorneys fees, expenses, expert witness fees, litigation and costs, provided Creditor prevails to any extent by settlement or otherwise.

No extension or renewal of time of payment of any indebtedness, no release or surrender of any security for any indebtedness, no release of any person primarily or secondarily liable on any indebtedness, and no delay in enforcement of payment of any indebtedness, shall affect the liability of the undersigned hereunder. Any and all payments upon the indebtedness made by the Debtor or by any of the undersigned, or by any other person, and the proceeds of any and all collateral or security for any of the indebtedness, may be applied by the Creditor upon such of the items of the indebtedness as the Creditor shall determine.

Each of the undersigned waives notice of acceptance of this guaranty, notice of the extension of credit or financial accommodation to the Debtor, notice of the amount of indebtedness which may exist from time to time, notice of any extension of the time for payment, demand for payment, notice of non-payment, protest, notice of protest, and all other notices of every kind and nature, and agrees that this guaranty may be enforced against the undersigned without any prior proceeding or action against the Debtor.

This guaranty is a continuing guaranty and shall remain in full force and binding upon the undersigned and his or their heirs, executors and administrators, notwithstanding the death of one or more of the undersigned, until the expiration of thirty (30) days after written notice of revocation by certified mail is received by the Creditor at its office and until any and all indebtedness of the Debtor to the Creditor incurred prior to the expiration of such thirty (30) day period shall have been fully paid.

If this guaranty is executed by more than one party, it shall be the joint and several obligation of said parties. If this guaranty is executed by a corporation or other business entity, the undersigned officer, partner or member of said entity represents and warrants that he/she has the power and authority to make such guaranty on behalf of the entity and that the making of such guaranty is in the best interests of the entity.

Any and all issues arising from or concerning the guaranty shall be governed by the internal laws of the State of Missouri. The undersigned hereby waives the right to a jury trial in any action, proceeding, or counterclaim brought by either Roofers Mart or the undersigned against the other. The undersigned agrees that the sole jurisdiction and venue of any lawsuit arising hereunder shall be in the Circuit Court of St. Louis County, Missouri, regardless of the location or residence of the undersigned.

IN WITNESS WHEREOF I/We have hereunto set my hand on the date set forth below.

Guarantor's signature (date)

Guarantor's signature (date)

Print name

Print name



Customer Payment and Invoice Preferences

Please send all payments to the corporate location:

**Roofers Mart, Inc.
7208 Weil Ave.
St. Louis, MO 63119**

How would you like to receive invoices and statements?

☐ Email Address _____

☐ Fax Number _____

☐ Mail (please provide address if different then on first page of credit application)

Is a PO number required? ☐ YES ☐ NO

Is your company Tax Exempt? ☐ YES ☐ NO (please include tax exempt letter)



MISSOURI DEPARTMENT OF REVENUE
BUSINESS TAXES BUREAU
MULTI-JURISDICTION SALES TAX
EXEMPTION CERTIFICATE

FORM
149
(REV. 4-88)

SEE REVERSE SIDE FOR
INSTRUCTIONS

ISSUED TO	ADDRESS	CITY, STATE, ZIP CODE
Roofers Mart, Inc.	7208 Weil Ave.	St. Louis, MO 63119
NAME OF FIRM (BUYER)		ENGAGED AS A REGISTERED
		<input type="checkbox"/> WHOLESALER
STREET ADDRESS OR P.O. BOX NUMBER		<input type="checkbox"/> RETAILER
		<input type="checkbox"/> MANUFACTURER
CITY, STATE, ZIP CODE		<input type="checkbox"/> LESSOR (SEE NOTE ON REVERSE SIDE.)
		<input type="checkbox"/> OTHER _____

The above named firm is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product to be resold, leased, or rented into the normal course of our business. We are in the business of wholesaling, retailing, manufacturing, leasing, or renting.

PRODUCT OR SERVICES RENDERED

STATE	STATE I.D. NUMBER	CITY OR STATE	STATE REGISTRATION OR I.D. NUMBER
CITY OR STATE	STATE REGISTRATION OR I.D. NUMBER	CITY OR STATE	STATE REGISTRATION OR I.D. NUMBER
CITY OR STATE	STATE REGISTRATION OR I.D. NUMBER	CITY OR STATE	STATE REGISTRATION OR I.D. NUMBER

I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a State or Use Tax, we will okay the tax due direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which, we may hereafter give to you unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state.

GENERAL DESCRIPTION OF PRODUCTS TO BE PURCHASED FROM THE SELLER

I swear or affirm that the information on this form is true and correct as to every material matter.

AUTHORIZED SIGNATURE (OWNER, PARTNER, OR CORPORATE OFFICER)	TITLE	DATE
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PARTNERVIEW ONLINE BILL PAY SYSTEM

Partnerview will allow you to view and print your invoices and make secure ACH payments. Currently, Partnerview is accepting payments made through your checking or savings account. **No credit card payments** can be made through Partnerview at this time.



Please fill out the form below completely and return it through either email or fax to:

Alisha Switzer

Email: Aswitzer@roofersmartinc.com

Fax: 314-884-6292

Once we receive the form below, we will complete the initial set up on your account. We will email you a link to the Partnerview website, a user name and a default password.

It will take 3 days to confirm banking and routing numbers. Once your banking account is confirmed, you will be able to log into your Partnerview account to view and pay invoices 24 hours a day.

You will receive a confirmation to the email address provided on this form once a payment has been made. The confirmation will list the amount of your payment and the invoices you have paid. It is very important to provide a working email.

PARTNERVIEW ONLINE PAYMENT ENROLLMENT FORM

Company Name: _____ Phone #: _____

Roofers Mart Account #: _____ Fax#: _____

Billing Contact Person: _____

Email Address: _____




Billing Address: _____

☐ Check box for invoice access only, no banking account to attach at this time

Bank Name/City/State: _____

Routing Number: _____

Account Number: _____

		
Routing/Transit # (A 9-digit number always between these two marks)	Checking Account #	Check # (this number matches the number in the upper right corner of the check – not needed for signup)

Authorized Signature: _____

OFFICE USE ONLY

Date: _____

Print Name: _____

Temp. Pswrd: _____