



BUSINESS CONTACT INFORMATION			
Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	ZIP Code:
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:

I Authorize National Tire Distributors LLC to receive information about my credit history.

Authorized Signature _____ Date _____

Authorization to receive credit information

I have been requested to extend credit to a customer of yours mentioned above. I have attached their authorization for release of this information.

Please provide us with the following information:

Length of time they have had credit with you _____ High Credit _____
 Current Balance _____ Maximum they have been past due _____
 Past due now _____ normal payment terms _____
 Type of customer they have been _____

Person reporting _____ Date _____

Please fax back to National @ 616-748-0994 or e-mail to mmcconnon@ntdtire.com your customer will appreciate your quick return of this information as an order for them may be pending. Thanks

National Tire Distributors LLC

National Tire Distributors LLC



2 PAGE CONFIDENTIAL CREDIT APPLICATION

BUSINESS CONTACT INFORMATION			
Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	ZIP Code:
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:
BUSINESS AND CREDIT INFORMATION			
Primary business address:			
City:		State:	ZIP Code:
How long at current address? operation?		How many years in	
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account	Account number		
Savings			
Checking			
Other			
BUSINESS/TRADE REFERENCES			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			

Name of Person
Signing This Application Please print: _____

Fed ID # / SS # _____

National Tire Distributors, LLC (the "Company") will charge interest on any past due balance at 1.5% per month with said interest being calculated from the date the payment was due.

In consideration of the Company extending credit to the above business, I/we do hereby agree, jointly and individually, to pay for all goods, wares and merchandise supplied to me/us or to the above business. In the event any account is placed with a third party for collection, I/We agree to pay all costs including reasonable attorney fees, court costs and finance charges. I/We authorize the Company to investigate our credit history, bank references and any other information deemed necessary to extend credit. I/We agree to immediately notify the Company of any change in ownership or address or form of said business. This agreement shall remain in force until written notice of revocation is received by .the Company

The undersigned as a person(s) financially interested in the partnership/proprietorship applicant hereby personally guarantee(s) the payment of all amounts due the Company arising out of the extension of credit to applicant, together with all costs of collection including reasonable attorney fees.

The undersigned agrees and consents that any action taken for collection or enforcement of sums due and owing to the Company from applicant may be brought in any court in the County of Ottawa, MI

Authorized Signature _____ Date _____

Authorized Signature _____ Date _____