

Terms on Accounts will be offered upon approval of this Account Credit Application. If Terms are offered, it is understood that account balances are due within 30 days from the date of invoice. Interest shall be added at a rate of 2% per month (24% per annum) on overdue charges. In the event of default of the agreed terms, any charges incurred to collect on overdue accounts shall be charged to the applicant.

COMPANY INFORMATION

| | | | |
|----------------------------|--|-------------------|------------|
| Company Name (DBA) | | Store # | |
| Legal Name | | Years in Business | |
| Authorized Signing Officer | Title | Phone Number | Fax Number |
| AP Contact Name | Manager Name | AP Email Address | |
| Resale or Tax Exempt # | Type of Business <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation | | |

BILLING INFORMATION

| | | | |
|----------------|------------|----------------|-----------------|
| Company Name | | | |
| Street Address | City | State/Province | Zip/Postal Code |
| Phone Number | Fax Number | | |

SHIPPING INFORMATION

SAME AS BILLING INFORMATION ■

| | | | |
|----------------|------------|----------------|-----------------|
| Company Name | | | |
| Street Address | City | State/Province | Zip/Postal Code |
| Phone Number | Fax Number | | |

TRADE REFERENCES

| | | | |
|------------------|------------|----------------|--------------|
| Name of Supplier | City | State/Province | Contact Name |
| Phone Number | Fax Number | Email Address | |
| Name of Supplier | City | State/Province | Contact Name |
| Phone Number | Fax Number | Email Address | |

BANK REFERENCE

| | | | |
|-------------------------|--------------------------------|----------------|-----------------|
| Name of Bank and Branch | How Long? years months | Phone Number | Contact Officer |
| Checking Account # | Savings Account # | Loan Account # | |

AUTHORIZATION

We hereby authorize Towels Direct, and its assigns, to make whatever credit inquiries deemed necessary in connection with this Credit Application or in the course of review or collection of any credit extended to this account. We authorize and instruct any person or consumer reporting agency to provide relevant information it may have to such credit inquiries. The information submitted here is true and correct, and we hereby authorize the references contained herein to release any necessary information.

| | | | |
|----------------------|-------|----------------------|-------|
| Authorized Signature | Date | Authorized Signature | Date |
| Name | Title | Name | Title |