



2338 S. 8th St., Amelia Island, FL 32034
888-773-4768 office • 904-277-0093 fax

CREDIT APPLICATION

Thank you for selecting Axia as your strategic partner. Please take a few minutes to complete this Credit Application. We will establish an account for your company and invoice monthly. Our terms are due upon receipt of invoice.

Applications must be completed and returned before Axia may start work.

FULL LEGAL NAME OF BUSINESS			DBA/AKA		DATE	E-MAIL	
BILLING ADDRESS					PHONE		FAX
CITY		STATE	ZIP CODE	DATE BUSINESS STARTED	STATE OF INCORPORATION		ESTIMATED MONTHLY PURCHASES
BUSINESS ENTITY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLC <input type="checkbox"/> SUB S CORP <input type="checkbox"/> LIMITED PARTNERSHIP <input type="checkbox"/> LIMITED LIABILITY PARTNERSHIP <input type="checkbox"/> OTHER				FEIN		DUNS NO	
NAMES AND TITLE OF OFFICERS, PARTNERS, OR OTHER			SOCIAL SECURITY NUMBER		RESIDENTIAL ADDRESS/TELEPHONE NUMBER		
PLEASE PRINT							
ACCOUNTS PAYABLE CONTACT			PHONE		FAX	E-MAIL ADDRESS	

To support this application for credit, please attach latest fiscal-year-end financial statement.

BANK NAME		PHONE		FAX	ACCOUNT NUMBER(S)	
ADDRESS		CITY	STATE	ZIP CODE	E-MAIL	CONTACT

We authorize banks, credit reporting agencies, and credit references to provide requested account information now and at any time in the future.

BUSINESS REFERENCES

LANDLORD	PHONE		FAX		E-MAIL
ADDRESS	CITY	STATE	ZIP CODE	CONTACT	

COMPANY	PHONE		FAX		E-MAIL
ADDRESS	CITY	STATE	ZIP CODE	CONTACT	

COMPANY	PHONE		FAX		E-MAIL
ADDRESS	CITY	STATE	ZIP CODE	CONTACT	

TERMS OF CREDIT AGREEMENT

The undersigned, a company officer, in consideration of the extension of credit by Axia and its successors and assigns (hereafter "Axia") agrees to pay its account according to Axia's then-current billing terms and, further, that a \$50 late fee and 1.5% monthly finance charge (18% per annum) or the maximum rate allowed by law, whichever is lower, will be added onto any invoices overdue by more than thirty (30) days. In the event of default in payment, the undersigned agrees to pay all costs of collection and collection agency fees, including and not limited to a reasonable attorney fee when incurred for consultation and trial or appellate services, whether suit be brought or not. The undersigned agrees that regardless of place of payment, all suits at law or in equity for any breach of this agreement or for default in payment shall be instituted and maintained in a court of competent jurisdiction in Duval County, Florida, and the undersigned waives any venue/forum non conveniens rights as well as right to jury trial. The undersigned certifies that the information contained in the Credit Application is true and correct and further agrees that any changes in ownership, officers, or form that the business operates as shall be made known to Axia in writing and delivered to Axia by certified U.S. Mail, return receipt requested, or by a nationally recognized courier service. Otherwise, said changes shall be ineffective as to Axia's enforcement of the terms of this agreement. The undersigned shall report to Axia in writing any dispute concerning billing within ten (10) days from the date of such billing. Failure to so report any such dispute shall constitute a waiver of any claim by the undersigned with respect to such dispute. The undersigned hereby personally guarantees payment when due on any and all obligations arising from this account. The undersigned is responsible for payment, jointly and severally, with its advertising agency, and such agencies, which place advertising orders on behalf of the undersigned, shall be conclusively deemed an authorized agent for the undersigned. This agreement contains the entire agreement between the parties and may not be modified or amended except by a writing signed by Axia. The laws of the State of Florida shall govern the terms of this agreement and the undersigned submits to the jurisdiction of the Courts of Duval County in the State of Florida.

NAME _____ AUTHORIZED SIGNATURE REQUIRED _____ TITLE _____ DATE _____



2338 S. 8th St., Amelia Island, FL 32034
888-773-4768 office • 904-277-0093 fax

PERSONAL GUARANTY

To: Axia and its successors and assigns:

Please publish, post or broadcast for the advertiser identified in the Credit Application, and its agents, successors, nominees and assigns, such advertising or other material as they or their representatives may submit, and in consideration thereof I personally and fully guaranty the payment of the same, whether evidenced by contract, open account, acceptance, note or otherwise, including any current debt. I waive notice of acceptance or rejection hereof, amounts of sales, dates of publication, posting or broadcasting, notice of default in payment, and legal proceedings against the advertiser. I authorize all banks, credit reporting agencies, and references to provide you with my personal credit information, now and at any time in the future, including after default in payment by advertiser.

This is a continuing, unlimited Guaranty and shall not be revoked by my death and shall remain in full force and effect until I or my Personal Representative gives 30-days advance notice in writing to terminate this Guaranty, and until such notice is received by you by certified U.S. Mail, return receipt requested or by a nationally recognized courier service.

In the event of default in payment, I agree to pay all costs of collection, including, and not limited to, a reasonable attorney fee when incurred for consultation, trial or appellate services, whether suite be brought or not. I agree that regardless of place of payment, all suits at law or in equity on this Guaranty shall be instituted and maintained in a court of competent jurisdiction in Duval County, Florida, and I waive any venue/forum non conveniens rights, and right to jury by trial.

This Guaranty contains our entire agreement and may not be modified or amended except by a writing signed by Axia. The singular herein includes the plural, as the context requires. The laws of the State of Florida shall govern the terms of this agreement and I agree to submit to the jurisdiction of the Courts of the State of Florida.

Witness:

Guarantor(s):

SSN:

Date:

WITNESS	GUARANTOR	SSN	DATE
WITNESS	GUARANTOR	SSN	DATE