

CUSTOMER APPLICATION

Name of Client that you are applying for credit with: **BSI**

COMPANY INFORMATION

Legal Name:		Fed ID #:		
DBA:				
Address:		City:	State:	Zip Code:
Phone:	Fax:	County/Parish:	Website:	
Mailing Address <i>(If different from above):</i>		City:	State:	Zip Code:
DAILY CONTACT PERSON Name:			Title:	
Phone:	Mobile:	Fax:	Email:	
FORM OF BUSINESS: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation				Business Start Date:
STATE or JURISDICTION OF INCORPORATION / ORGANIZATION:				
Home Office / Parent Company:			City:	State:
Bankruptcy filings (<i>company or any principals</i>)?: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, which type(s) and date(s):</i>				
Purchase Order Required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Authorized Person to Issue Purchase Orders:		
Are you listed with Dun & Bradstreet? <input type="checkbox"/> Yes <input type="checkbox"/> No #:				
MOTOR CARRIER #:		DOT #:	NAICS #:	

PRINCIPALS & SHAREHOLDERS

NAME (<i>full legal</i>)	TITLE	ADDRESS	PHONE	EMAIL ADDRESS

CREDIT REFERENCES

BANK NAME	ADDRESS	ACCOUNT #	BANK OFFICER	PHONE

TRADE CREDITORS

NAME OF COMPANY	ADDRESS	EMAIL	PHONE	FAX

The Company applying for credit in this Application ("Company") has requested credit from the clients listed above and any other client (collectively, "Clients") from whom ProBilling & Funding Service, a division of Peoples Bank of Alabama, may from time to time purchase accounts receivable. Company is furnishing the information and agreements herein solely at the clients request to obtain credit from clients and understand that ProBilling & Funding Service may refuse to purchase accounts of the Company from any of the clients at any time without notice to Company or any other party. All parties listed above, and with or without notice to Company, any client may receive a copy of this application and all such parties are authorized to release credit concerning Company to ProBilling & Funding Service. Company understands that all accounts are due on the 15th day of the calendar month after the calendar month of the statement date. If ProBilling & Funding Service, after Company's refusal to pay, collects through an attorney any indebtedness related to any client account assigned to ProBilling & Funding Service, the Company shall pay all collection costs, including a reasonable attorney's fee. Payments accepted in U.S. funds only.

Signature / Title _____ Print Name _____ Date _____

PERSONAL GUARANTY

The undersigned individually, jointly and severally and unconditionally guarantee the payment when due of all invoices/accounts purchased by ProBilling & Funding Service, a division of Peoples Bank of Alabama, from any Client with the above applicant or any other applicant with common ownership. The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guaranty hereby consents to and authorizes the use of consumer credit report on the undersigned, by ProBilling & Funding Service from time to time as may be needed in the credit evaluation process.

Signature _____ Print Name _____ Date _____

Social Security #

PLEASE FORWARD COMPLETED CUSTOMER APPLICATION TO: credit@probfs.com or Fax (256) 301-0238
PAYMENTS REMIT TO ADDRESS: P.O. Box 2222, Decatur, AL 35609-2222
 p 844.277.6237 f 256.301.0238