



# OPEN ACCOUNT AGREEMENT

3290 Green Pointe Pkwy  
Suite 1000  
Norcross, GA 30092  
770-840-9010 • Fax 770-840-0061

FOR OFFICE USE ONLY:
Approved by _____
Date _____
Open Account Limit _____
Terms _____

BUSINESS NAME \_\_\_\_\_ How long in business? \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_ Corporation \_\_\_ Partnership \_\_\_ Sole Proprietorship Sales Tax ID # \_\_\_\_\_

Person to speak with regarding payments \_\_\_\_\_ Title \_\_\_\_\_

Owner Name \_\_\_\_\_ Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Social Security # \_\_\_\_\_

TRADE REFERENCES

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

BANK REFERENCE

Name \_\_\_\_\_

Account No. \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bank Contact: \_\_\_\_\_

Approximate monthly thermography usage? \$ \_\_\_\_\_

**THE APPLICANT AGREES TO THE TERMS AND CONDITIONS OF THE BCT OPEN ACCOUNT AGREEMENT AS FOLLOWS:**

1. Full payment is due each Wednesday for products delivered the previous week.
2. An open account is offered to those customers who will average two hundred dollars (\$200.00) or more per month in charges.
3. All legal fees, court costs, and collection fees will be paid by the applicant in case of default on the terms of this agreement.
4. Interest will be paid to BCT, by the applicant, at the rate of one and a half percent (1½%) per month on all money due to BCT which is past due.
5. All work and services performed by BCT shall not pass totally to the applicant until all money due to BCT is paid in full.
6. There is a twenty-five dollar (\$25.00) service charge on all returned checks.
7. The applicant hereby gives permission to disclose its experience with the bank and trade references indicated above to BCT. This information is to be used in consideration of granting an open account to the applicant.

ACCEPTANCE OF TERMS AND CONDITIONS AS HEREBY SET FORTH BY AUTHORIZED PERSON. IF CORPORATE ACCOUNT, THE UNDERSIGNED OFFICER PERSONALLY GUARANTEES PAYMENT OF ANY INDEBTEDNESS BY APPLICANT TO BCT AS AN INDUCEMENT FOR THE EXTENSION OF CREDIT.

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_