



New Customer Application

Cross Country Dist, LLC
221 Westec Dr (Suite B)
Mt. Pleasant, PA 15666

This application is intended for creating a customer account with Cross Country Dist, LLC and is not an application for trade credit. Please fax completed application to 724.696.3250. If Applicant has any questions, please call 1.800.252.1966 or email info@crosscountrydist.com. Any missing information below will delay the processing of application.

Date ___/___/___ EmailAddress _____ Website _____

Business Legal Name _____ DBA _____

Phone _____ Fax _____ Check One: Corporation____ Partnership____ Proprietorship____

Number of Employees _____ In Business Since ___/___/___ Date of Incorporation (if applicable) ___/___/___

Mailing Address: Street _____ City, State & Zip _____

Shipping Address: Street _____ City, State & Zip _____

Parent Co. Name (if applicable) _____ Partnership Name (if applicable) _____

Mailing Address (if applicable) _____ City, State & Zip _____

State Tax Exemption # _____ Federal ID # _____

Accounts Payables Manager (s) _____ Email (s) _____

Phone _____ Fax _____

Name of Bank _____ Contact(s) _____

Account Number(s) _____

Mailing Address _____ City, State & Zip _____

Phone _____ Fax _____ Email _____

Complete the following for all officers, partner, or an individual proprietor and all authorized check writers.

Name(s) & Title(s) _____

Home Address(s) _____

City, State & Zip _____

SSN#(s) & Date(s) of Birth _____

The undersigned certifies under penalties of law that the information given in this application is true and correct to the best of his / her knowledge and personally guarantees all instruments of payment on the above account. Any return checks, NSF or stop payment, will be subject to a \$50.00 administrative fee or 10% of the check amount whichever is greater. The undersigned individual ("Guarantor") hereby personally guarantees, unconditionally and irrevocably, the prompt payment of any sums now or hereafter owed to Cross Country Dist, LLC by Debtor whether said sums are due under open account, contract or otherwise. This Guaranty shall continue in force until notice in writing, sent by register or certified mail, return receipt requested, is received by Cross Country Dist, LLC. Said notice shall specify the date on which Guaranty is to be terminated; said date not to be less than seven (7) days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Below may only be completed by the Guarantor (owner/President/Chairman/Principal) of Business named above and is required for account activation.

Date ___/___/___

Guarantor Printed Name _____ Guarantor Signature _____

THIS APPLICATION IS NOT AN EXTENSION OF TRADE CREDIT / OPEN ACCOUNT.

If you wish to apply for trade credit / open account – please request Cross Country Dist Credit Application from your sales rep.