URM ACCOUNT APPLICATION

Foodservice Convenience & Grocery URM Sales Consultant Name			
Cash & Carry URM Cash & Carry City			
SHIPPING ADDRESS	BILLING ADD	RESS	
Trade Name (DBA)	Legal Name of C	Legal Name of Company (Corporate, Partnership or Propietorship Name)	
Address	Address		
City, State, Zip Code	City, State, Zip C	City, State, Zip Code	
Phone Number	Accounts Payab	Accounts Payable Contact and Phone Number	
Federal Tax ID	A/P Fax Number	r A/P Email Address	
Business Type Previous Customer of URM? If Yes, Under What Name? Type of Cuisine (Italian, Greek, Hispanic, etc) How Much Do You Spend On Weekly Purchases?			
Proprietorship Partnership Limited Partnership Limited Liability Company Corporation (State Incorporated In) Non-Profit Length of Time In Business Length of Present Ownership Are The Applicant(s) Party To Any Pending Litigation or Legal Proceedings? Yes			
		AL PARTNERS OR CORPORATE OFFICERS	
Name and Title	Name and Title	Name and Title	
Home Address City, State, Zip Code	Home Address City, State, Zip Code	Home Address City, State, Zip Code	
Home Phone Number	Home Phone Number	Home Phone Number	
Social Security Number % Ownership	Social Security Number % Ownership	Social Security Number % Ownership	
REQUESTED TERMS: PAYMENT METHOD: EFT (EFT Preferred. See Form On Back Page.) 7-Day 14-Day COD* (EFT required) Credit Card (Prior approval needed. Extra 3% charge added per payment.) ACH			
TRADE REFERENCES (FOOD DISTRIBUTORS PREFERRED)			
Business Name	Business Name	Business Name	
Street Address	Street Address	Street Address	
City, State, Zip Code	City, State, Zip Code	City, State, Zip Code	
Phone Number	Phone Number	Phone Number	
Account Number	Account Number	Account Number	

WASHINGTON CUSTOMERS: A copy of your Washington Reseller Permit is required. **IDAHO CUSTOMERS**: A copy of your Idaho form ST-101 is required.

*All new accounts will automatically be established as COD. Terms may be revisited after 90 days.

AGREEMENT

The undersigned certifies that the information contained herein is true and correct and URM Stores, Inc., will be notified in writing of any changes in the business ownership. The undersigned authorizes URM Stores, Inc., to inquire into and obtain from any bank, lending institution or credit reference, whether listed on the credit application or not, any and all information relating to the Applicant's credit worthiness. The undersigned Customer agrees that all purchases made are subject to the following terms and conditions:

- **1**) The Customer hereby agrees to the terms stated below.
- 2) Any late payment is subject to assessment of interest charges based on the billing statement.
- 3) In the event payment is late or not made, URM Stores, Inc. may declare the entire balance due and owing. The Customer agrees to pay all costs of collection, including reasonable attorney's fees, with or without suit, on all accounts not paid when due.
- 4) In the event the Customer declares bankruptcy, then URM Stores, Inc. is entitled to attorney fees and costs incurred to protect or enforce its rights regarding the collateral which is the subject of this Credit Agreement.
- 5) As security for any amount due URM Stores, Inc., the Customer grants to URM Stores, Inc. a security interest in all equipment, supplies, or inventory purchased from URM Stores, Inc. and the proceeds thereof.
- 6) The Customer understands and agrees that URM Stores, Inc. may cancel extension of credit and/or discontinue deliveries at any time.
- 7) The Customer agrees all sales are final and any product returned may be subject to a restocking charge.
- 8) If Customer places an order for product, the Customer agrees to purchase all product ordered at URM Stores, Inc. sales price.
- 9) All terms of any sale shall be governed by the laws of the State of Washington, and venue of any legal action in this account shall be in Spokane County, Washington.

ORAL AGREEMENTS OR ORAL COMMITMENTS TO LOAN MONEY, EXTEND CREDIT, OR TO FORBEAR FROM ENFORCING PAYMENT OF A DEBT ARE NOT ENFORCEABLE UNDER WASHINGTON STATE LAW.

Date	Full Name of Corporation		Title
Printed Name		Signature	

PERSONAL GUARANTEE

I have read the Credit Agreement and I agree to adhere to its provisions. The Guarantor consents in advance to any modification, renewal or extension of the Credit Agreement or credit terms guaranteed. If there is more than one Guarantor, their liability shall be joint and several. URM Stores, Inc. may negotiate and settle with the Applicant(s) or any of the undersigned Guarantor(s), and surrender any collateral which is held without notice to any Guarantor or without affecting the obligations assumed by the Guarantor. In the event of default or bankruptcy resulting in collection efforts, litigation or appeals, URM Stores, Inc., shall be entitled to reasonable attorney fees and collection costs.

ORAL AGREEMENTS OR ORAL COMMITMENTS TO LOAN MONEY, EXTEND CREDIT, OR TO FORBEAR FROM ENFORCING PAYMENT OF A DEBT ARE NOT ENFORCEABLE UNDER WASHINGTON STATE LAW.

Dated this	Day of	, 20	
Printed Name		Signature of Guarantor	
Street Address		In Individual Capacity	
City, State, Zip Code		Spouse In Individual Capacity	

SECURITY AGREEMENT

(FOR CONVENIENCE & SMALL GROCERY CUSTOMERS ONLY)

As security for any amounts due to URM Stores, Inc., the Customer grants to URM Stores, Inc., a security interest in all inventory owned by Applicant(s) and all inventory now or after acquired including, without limitation, inventory and supplies held for sale or use by the Applicant(s), and all such property after acquired, and all additions, increases or replacements to such inventory or property or proceeds therefrom. The Applicant(s) agree to sign any appropriate financing statements requested by URM Stores, Inc. All terms of the Agreement are by this reference incorporated herein. In the event of default, URM Stores, Inc. shall have all remedies available at law, including without limitation all remedies provided for under the Uniform Commercial Code.

Customer Name	Customer Name	Customer Name
Signature	Signature	Signature
Date	Date	Date

EFT (Electronic Funds Transfer) **AUTHORIZATION FORM**



Date_____

I authorize URM Stores, Inc. to initiate a Electronic Funds Transfer (EFT) direct bank debit deduction from the bank account indicated below.

The funds will be used by URM Stores, Inc. to pay my URM charges for purchases and fees according to my approved terms.

Business Name	
Name on Bank Account	
Bank Name	Bank Telephone Number
ABA Transit Routing Number	
Checking Account Number	
	*Note: Please provide a voided check copy (not a deposit slip).
Authorizing Signature	
Corporate Title	

To ensure confidentiality, please fax this form to (509) 468-9473.

URM ACCOUNTING DEPARTMENT 7511 N. FREYA ST. SPOKANE, WA 99217 PHONE 800.541.2207 or 509.467.2755 FAX 509.468.9473