



MEDART ENGINE • Midwest • Western • Southern • Texas Divisions
MEDART MARINE • Midwest • Western • Southern • Gulfcoast Divisions

CUSTOMER APPLICATION

Please Note:

- 1. Customer Information Sheet must be filled out in full in order to be processed.
2. Please send business references (they allow us to review credit and set up your account more quickly). Credit card references are not acceptable.
3. Remember to fill out Sales Tax Exemption Form.
4. Please attach a copy of current financial statement.
5. Return to: Medart, Inc. 124 Manufacturers Drive St. Louis, MO 63010-4727
Attn: Credit Department or Fax to: Medart, Inc. 1-888-510-3100 Attn: Credit Department or email to: ar@medartinc.com
6. This application is also available online at www.medartinc.com.

Any questions call 636-282-2300.

DATE \_\_\_\_\_

IF APPLYING FOR CASH, C.O.D. OR CREDIT CARD ACCOUNT ONLY FILL OUT THIS SECTION.

COMPANY NAME \_\_\_\_\_
SHIP TO ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_
PHONE NO. (\_\_\_\_) \_\_\_\_\_ FAX NO. (\_\_\_\_) \_\_\_\_\_ E-MAIL \_\_\_\_\_
BILL TO ADDRESS (If different than ship to): \_\_\_\_\_
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_ PHONE NO. (\_\_\_\_) \_\_\_\_\_ FAX NO. (\_\_\_\_) \_\_\_\_\_
SEND MY INVOICES BY:  E-MAIL  FAX SEND MY STATEMENTS BY:  E-MAIL  FAX
TYPE OF OWNERSHIP:  INDIVIDUAL  PARTNERSHIP  CORPORATION SS# OR FED. I.D. # \_\_\_\_\_
DATE BUSINESS STARTED OR DATE OF INCORPORATION \_\_\_\_\_
DESCRIBE BUSINESS FUNCTION BRIEFLY \_\_\_\_\_
LIST NAMES OF OWNERS, PARTNERS, OFFICERS, BOOKKEEPER
1. \_\_\_\_\_ TITLE \_\_\_\_\_ HOME PHONE NO. (\_\_\_\_) \_\_\_\_\_
2. \_\_\_\_\_ TITLE \_\_\_\_\_ HOME PHONE NO. (\_\_\_\_) \_\_\_\_\_
3. \_\_\_\_\_ TITLE \_\_\_\_\_ HOME PHONE NO. (\_\_\_\_) \_\_\_\_\_
BANK REFERENCE:
BANK NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_ PHONE NO. (\_\_\_\_) \_\_\_\_\_
ACCOUNT # \_\_\_\_\_ PERSON TO CONTACT \_\_\_\_\_ FAX NO. (\_\_\_\_) \_\_\_\_\_
TYPE OF ACCOUNT REQUESTED:  OPEN ACCOUNT AMOUNT OF CREDIT REQUESTED - MONTHLY \$ \_\_\_\_\_;  COD;
 CREDIT CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_ NAME ON CARD \_\_\_\_\_
CREDIT CARD BILLING ADDRESS \_\_\_\_\_

IF APPLYING FOR OPEN ACCOUNT FILL OUT THIS SECTION ALONG WITH TOP SECTION.

TRADE CREDIT REFERENCES:
NAME \_\_\_\_\_ ACCOUNT # \_\_\_\_\_
ADDRESS \_\_\_\_\_
PHONE NO. (\_\_\_\_) \_\_\_\_\_ FAX NO. (\_\_\_\_) \_\_\_\_\_
NAME \_\_\_\_\_ ACCOUNT # \_\_\_\_\_
ADDRESS \_\_\_\_\_
PHONE NO. (\_\_\_\_) \_\_\_\_\_ FAX NO. (\_\_\_\_) \_\_\_\_\_
NAME \_\_\_\_\_ ACCOUNT # \_\_\_\_\_
ADDRESS \_\_\_\_\_
PHONE NO. (\_\_\_\_) \_\_\_\_\_ FAX NO. (\_\_\_\_) \_\_\_\_\_

INDIVIDUAL PERSONAL GUARANTY

I, \_\_\_\_\_, RESIDING AT \_\_\_\_\_ DATE \_\_\_\_\_
FOR AND IN CONSIDERATION OF YOUR EXTENDING CREDIT AT MY REQUEST TO \_\_\_\_\_
(NAME OF COMPANY), HEREINAFTER REFERRED TO AS THE "COMPANY", OF WHICH I AM \_\_\_\_\_ (TITLE), HEREBY PERSONALLY
GUARANTY TO YOU THE PAYMENT OF ANY OBLIGATION OF THE COMPANY AND I HEREBY AGREE TO BIND MYSELF TO PAY YOU ON DEMAND ANY
SUM WHICH MAY BECOME DUE TO YOU BY THE COMPANY WHENEVER THE COMPANY SHALL FAIL TO PAY THE SAME. IT IS UNDERSTOOD THAT
THIS GUARANTY SHALL BE A CONTINUING AND IRREVOCABLE GUARANTY AND INDEMNITY FOR SUCH INDEBTEDNESS OF THE COMPANY. I DO
HEREBY WAIVE NOTICE OF DEFAULT, NON-PAYMENT AND NOTICE THEREOF AND CONSENT TO ANY MODIFICATION OR RENEWAL OF THE CREDIT
AGREEMENT HEREBY GUARANTEED.
SIGNATURE \_\_\_\_\_ WITNESS: \_\_\_\_\_
ADDRESS: \_\_\_\_\_

IF THE ACCOUNT BECOMES PAST DUE, APPLICANT AGREES TO PAY INTEREST AT THE RATE OF 1-1/2% PER MONTH CALCULATED ON THE AMOUNT PAST DUE. IF THE ACCOUNT IS PLACED FOR COLLECTION, THE APPLICANT AGREES TO PAY ANY COLLECTION COST INCURRED TO COLLECT THE ACCOUNT BALANCE, INCLUDING REASONABLE ATTORNEY'S FEES. THE UNDERSIGNED WARRANTS THAT THE INFORMATION SUBMITTED IS TRUE AND CORRECT. YOU ARE AUTHORIZED TO INVESTIGATE THE CREDIT REFERENCES LISTED ABOVE.

APPLICANT'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_
TO BE COMPLETED BY MEDART'S SALESPERSON:  ENGINE  MARINE PRICE CODE \_\_\_\_\_ FRT \_\_\_\_\_
MEDART SALESPERSON'S SIGNATURE \_\_\_\_\_ SALES # \_\_\_\_\_

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CREDIT DEPARTMENT • 636-282-2300

### WELCOME

I welcome your company in doing business with Medart, Inc. I encourage everyone to establish or work towards an Open Account Basis. Good credit is based on timely payments. Orders are normally shipped on a COD or Credit Card basis until a review of credit is completed. Please fill out the enclosed forms completely and as soon as possible. We will make every effort to quickly process your application.

A Brief History of Medart, Inc. We started in 1912 as a magneto repair facility. This grew into an automotive distribution company. We sold the automotive business in 1982. In the early 1930's, we began in the Air Cooled Engine business.

In 1970, we entered the Marine Industry as a distributor. This was primarily in the Pleasure Boating Industry and included some Commercial Marine business.

Today, we distribute a wide variety of engines, parts, and accessories for the Lawn and Garden Outdoor Power Equipment Industry; and Marine parts and accessories for the Pleasure Boat Industry and selected products for the Commercial Marine business.

We have a total of 6 facilities in St. Louis, Kansas City, Memphis, Mobile and Houston regions totalling 360,000 square feet to serve you. The ability to double our warehouse space is already built in. All 6 of our locations are efficient and ready to offer you same day shipments. From these facilities we can provide next day shipping service to 15 states and partially to 4 additional states. On a second day shipping basis we can serve: to the east, from New York to Miami; to the north, the Canadian Border; to the south, Florida; and to the west, from New Mexico to Wyoming.

Medart, Inc., is owned and operated by the Medart Family. I am the 3rd generation to be actively involved in the business. A younger 4th generation is already involved in the business. Many of our associates are 2nd generation with even a few 3rd and 4th generation associates. Every associate shares in the company's profit sharing program which means each associate has a stake in your satisfaction and future success.

Our past, present, and future depends on our abilities to be your best supplier and trusted advisor. Every Medart associate welcomes your thoughts and suggestions to better serve your needs.

**Welcome to the Medart Family!**  
**Michael Medart - President, Medart, Inc.**

### SALES TAX EXEMPTION

MAIL TO: MEDART, INC. • 124 Manufacturers Drive • St. Louis, MO 63010-4727 • Attn: Credit Dept.  
OR FAX TO: MEDART, INC. • 1-888-510-3100 • Attn: Credit Dept. OR EMAIL TO: ar@medartinc.com

Only accounts with a Tax exemption number ON FILE will be exempt from paying the sales or use tax.

This is to certify that all merchandise purchased by the undersigned from Medart, Inc. is exempt from sales tax because:

- It is purchased for resale as tangible personal property
- Other \_\_\_\_\_

DATE \_\_\_\_\_

- SALES TAX EXEMPTION NO. \_\_\_\_\_
- BUSINESS NAME \_\_\_\_\_
- AUTHORIZED SIGNATURE \_\_\_\_\_

### CREDIT RELEASE

MAIL TO: MEDART, INC. • 124 Manufacturers Drive • St. Louis, MO 63010-4727 • Attn: Credit Dept.  
OR FAX TO: MEDART, INC. • 1-888-510-3100 • Attn: Credit Dept. OR EMAIL TO: ar@medartinc.com

### AUTHORIZATION TO RELEASE INFORMATION

The undersigned hereby authorizes the Credit Department of Medart, Inc., of St. Louis, MO, to obtain information pertaining to accounts of deposit, credit obligations and all other credit matters which they may require in connection with my (our) request for an open line of credit.

This form MAY BE REPRODUCED AND THAT COPY SHALL BE AS EFFECTIVE AS THE ORIGINAL AUTHORIZATION which I (we) have signed.

All information obtained will be held in strict confidence.

DATE \_\_\_\_\_

- BUSINESS NAME \_\_\_\_\_
- SIGNED \_\_\_\_\_
- TITLE \_\_\_\_\_
- ADDRESS \_\_\_\_\_