



# SOUTHEASTERN PAPER GROUP®

# CUSTOMER ACCOUNT APPLICATION & GUARANTY

Albany, GA    Atlanta, GA    Conway, SC    Pigeon Forge, TN    Spartanburg, SC  
 Vidalia, GA    Browns Summit, NC    Jacksonville, FL    Lakeland, FL

Please email completed application to: [newaccounts@sepg.com](mailto:newaccounts@sepg.com)  
 For questions, call the credit department at 800-858-7230, extension 3391

## SECTION I

Company Name (Hereafter referred to as "Applicant" in this Application & Guaranty)

Ship To Name (For multiple ship to locations, please include a separate list)

Billing Address

Shipping Address

City State Zip

City State Zip

Phone Fax

County Phone

Attention Ext.

Contact Name Mobile Phone

Accounts Payable Contact Accounts Payable Phone

Receiving Days (M-F) Receiving Hours

Accounts Payable Email

Special Delivery Instructions

## SECTION II

Entity Type: Corporation Limited Liability Company Franchise or Member of a Chain  
 Sole Proprietorship Non-Profit Organization Other \_\_\_\_\_

Applicant's Legal Name

DUNS # Federal Tax ID #

Corporation Corporate Officers or Limited Liability Company Members:

Name Name Name

Title Title Title

Applicant \_\_\_\_\_

**SECTION III**

\_\_\_\_\_  
 Date Established \_\_\_\_\_ Or Acquired \_\_\_\_\_

\_\_\_\_\_  
 Additional Businesses \_\_\_\_\_

\_\_\_\_\_  
 Anticipated Monthly Purchases \_\_\_\_\_

\_\_\_\_\_  
 Tractor trailer/straight truck access \_\_\_\_\_

\_\_\_\_\_  
 Contact name \_\_\_\_\_ Contact number \_\_\_\_\_

\_\_\_\_\_  
 Specific place to drop delivery if no one is there \_\_\_\_\_

\_\_\_\_\_  
 Who is allowed to sign for orders? \_\_\_\_\_

\_\_\_\_\_  
 Who is not allowed to sign for orders? \_\_\_\_\_

\_\_\_\_\_  
 Delivery days \_\_\_\_\_

\_\_\_\_\_  
 Accept deliveries during lunch hours? \_\_\_\_\_

Terms Requested:    COD            Credit Card            Net 30            Other: \_\_\_\_\_

Sales Tax Exempt?    Yes    No    Sales Tax Number: \_\_\_\_\_  
 (A copy of the certificate must accompany this Application)

Invoice via email?	Yes	No	Purchase Order Required?	Yes	No
Email address: _____			Accept subs?	Yes	No
Invoice with delivery?	Yes	No	Accept Backorders?	Yes	No
Packing slip w/delivery / Invoice mailed?	Yes	No	Do you participate in pallet exchange?	Yes	No
Residential?	Yes	No	Dock access?	Yes	No
Liftgate required?	Yes	No			

Applicant \_\_\_\_\_

**SECTION IV - BANK REFERENCE**

Bank Name \_\_\_\_\_

Phone \_\_\_\_\_

Contact \_\_\_\_\_

Title \_\_\_\_\_

Checking Account Number \_\_\_\_\_

**SECTION IV - BUSINESS TRADE REFERENCES**

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

City & State \_\_\_\_\_

City & State \_\_\_\_\_

City & State \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Fax \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Account Number \_\_\_\_\_

Account Number \_\_\_\_\_

Account Number \_\_\_\_\_

## SECTION V - TERMS & CONDITIONS

This Customer Account Application (Application) is made to Southeastern Paper Group Inc. (SEPG) for the purpose of inducing SEPG to extend credit accommodations to the applicant named below (Applicant) and in accordance with the terms below:

1. Applicant hereby affirms that the information provided on this credit application and guaranty (and any accompanying document, if any) is true and complete to the best of Applicant's knowledge and Applicant understands that SEPG (Seller) intends to rely upon such information. Applicant also agrees that if Seller determines that Applicant submitted false information or omitted material information, Seller, with or without notice, may deny any credit privileges and rescind any credit that may have been extended to Applicant.
2. Applicant agrees that, unless otherwise provided by law, Seller may from time to time extend or refuse additional credit with or without notice, at Seller's sole discretion and without regard to any request of Applicant.
3. Applicant agrees to pay according to the terms of the sale, as approved by Seller and shown on invoices. All purchases by Applicant of goods and/or services from Seller will be made in accordance with the terms and conditions of the Application and any agreements, invoices and/or other SEPG documents evidencing Applicant's obligations to Seller, all of which are incorporated herein by this reference. Any additional or different conditions appearing in Applicant's purchase order form or elsewhere are hereby superseded by the Application and those documents it incorporates by reference, unless agreed to in writing by the duly authorized representative of each party.
4. In the event that monies due from Applicant are collected by law, or through an Attorney at Law, Applicant agrees to pay reasonable Attorney's fees not to exceed 33% of the principal owing.
5. Applicant and its guarantor authorize a thorough investigation of their business and personal background, credit history, character, and general reputation in the community, as Seller sees fit, including conducting interviews, obtaining a credit report, and/or checking references. Applicant agrees to cooperate in such an investigation and authorizes the bank and trade references listed in this credit application to release necessary information to Seller in order to verify the information contained in this application. Applicant understands that the information being furnished in this application, and any other information obtained through a background check and a consumer report will be used to determine the amount and conditions of the credit to be extended. Applicant releases from all liability or responsibility persons or corporations listed in this application that information Seller requests as part of its background investigation.
6. Applicant agrees that all invoices are due and must be paid according to the terms listed on the invoice. Applicant agrees that past due invoices are subject to a late fee that is the lesser of (1) 1.5% of the unpaid principal balance or (2) the highest rate permitted by law.
7. Claims regarding invoices must be made within ten (10) working days of the date of the invoice.
8. Deliveries may, at the discretion of Seller, be suspended if invoices are not paid within specified terms and subsequent orders may be held until the account is current. A \$25.00 handling charge will be assessed on all returned checks. This Application and all transactions between Applicant and Seller shall be governed by and interpreted in accordance with the laws and decisions of the State of South Carolina, without regard to its principles of conflict of laws, and no other jurisdiction.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Must appear in Section II)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

Applicant \_\_\_\_\_

**SECTION VI - PERSONAL GUARANTY (OPTIONAL)**

In consideration of Seller's agreement to extend credit to Applicant, as identified in Section I of this Credit Application and Guaranty, the undersigned personally guarantees to Seller the payment of any and all current and/or future obligations owed by Applicant to Seller, or any other extension of credit by Seller to Applicant, together with all applicable charges, and reasonable Attorney's fees (not to exceed 33%). Guarantor waives notice of acceptance of this Personal Guaranty or any extensions in time of payment, and of all other notices to which the undersigned would be otherwise entitled by law and agrees to pay all amounts owing hereunder upon demand, without requiring any prior action or proceeding against Applicant. Guarantor authorizes Seller to verify personal credit status now and in the future if Seller deems necessary.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Physical Address

\_\_\_\_\_  
Physical Address

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Location

\_\_\_\_\_  
Customer #

\_\_\_\_\_  
Sales Rep Name

\_\_\_\_\_  
Sales #

\_\_\_\_\_  
Terms

\_\_\_\_\_  
Credit Line

\_\_\_\_\_  
Approved By

