



P.O. Box 3392 • Stuart, FL 34995
 Phone: (772) 335-2262 • Fax: (772) 398-0636

Dear New Customer,

Thank you for choosing PMF as your total solution provider, we have put together the information below to help inform you about our services, solutions, policies, and financial solutions. Also included is a simple form which would give your company access to NET-15 payment terms.

Items Included:

Page(s)	Description	Additional
1	Cover Letter	
2	Customer Informational	Required if not applying for NET Terms or Automatic Credit Card Payment
3 - 4	Credit Card Authorization Form	
5 - 6	Simple NET15 Application	
7 - 11	NET Terms Credit Application	

If you have any questions about the contents of this packet or any of our products or services please contact your PMF representative or our main office by calling (772) 335-2262.



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Customer Informational

SECTION A.

LEGAL NAME OF COMPANY: _____

TRADE NAME (dba): _____

BILLING/MAILING ADDRESS: _____

CITY,STATE,ZIP: _____

PHONE NO.: _____ FAX NO.: _____

WEBSITE ADDRESS: http://_____

TYPE: CORPORATION PROPRIETORSHIP PARTNERSHIP

TAX EXEMPT NO. (IF APPLICABLE;ATTACH TAX ID FORM): _____

YRS. IN BUSINESS: _____

OWNERS NAME OR PARTNER 1: _____

PARTNER 2 NAME: _____

PARTNER 3 NAME: _____

PARTNER 4 NAME: _____

MAIN ORDERING/BILLING CONTACT :

NAME: _____

TELEPHONE EXTENSION: _____

EMAIL: _____

SECONDARY ORDERING/BILLING CONTACT:

NAME: _____

TELEPHONE EXTENSION: _____

EMAIL: _____



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CREDIT CARD AUTHORIZATION FORM

Please complete both sections of this application if your would like to automatically pay by credit card please see our Credit Card Authorization Form.

Thank you,

PMF

SECTION A.

LEGAL NAME OF COMPANY: _____
TRADE NAME (dba): _____
BILLING/MAILING ADDRESS: _____
CITY,STATE,ZIP: _____
PHONE NO.: _____ FAX NO.: _____
WEBSITE ADDRESS: http://_____

TYPE: CORPORATION PROPRIETORSHIP PARTNERSHIP

TAX EXEMPT NO. (IF APPLICABLE;ATTACH TAX ID FORM): _____

YRS. IN BUSINESS: _____

OWNERS NAME OR PARTNER 1: _____

PARTNER 2 NAME: _____

PARTNER 3 NAME: _____

PARTNER 4 NAME: _____

MAIN ORDERING/BILLING CONTACT :

NAME: _____

TELEPHONE EXTENSION: _____

EMAIL: _____

SECONDARY ORDERING/BILLING CONTACT:

NAME: _____

TELEPHONE EXTENSION: _____

EMAIL: _____

FULL PAYMENT DUE WITHIN: 0 DAYS FROM DATE OF INVOICE

SECTION B.

CREDIT CARD 1:

VISA MASTERCARD DISCOVER/NOVUS AMERICAN EXPRESS

CREDIT CARD NO.: _____ EXP. DATE: _____

PHONE: _____

CREDIT CARD BILLING ADDRESS: _____

*I AM AUTHORIZED SIGNER ON ABOVE CARD AND HEREBY GIVE Programming Methods, Inc.
PERMISSION TO BILL THE CREDIT CARD WHEN AN INVOICE BECOMES DUE:*

Name on Card: _____ Signed: _____

CREDIT CARD 2:

VISA MASTERCARD DISCOVER/NOVUS AMERICAN EXPRESS

CREDIT CARD NO.: _____ EXP. DATE: _____

PHONE: _____

CREDIT CARD BILLING ADDRESS: _____

*I AM AUTHORIZED SIGNER ON ABOVE CARD AND HEREBY GIVE Programming Methods, Inc.
PERMISSION TO BILL THE CREDIT CARD WHEN AN INVOICE BECOMES DUE:*

Name on Card: _____ Signed: _____



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Simple NET-15 Application

Please complete both sections of this application if your company would like to enjoy the benefits of NET-15 payment terms. If your company would like NET-30 or NET-60 or a credit line larger than \$1,000.00 please use our NET Terms Credit Application. If your would like to automatically pay by credit card please see our Credit Card Authorization Form.

Thank you,

PMF

SECTION A.

LEGAL NAME OF COMPANY: _____

TRADE NAME (dba): _____

BILLING/MAILING ADDRESS: _____

CITY,STATE,ZIP: _____

PHONE NO.: _____ FAX NO.: _____

WEBSITE ADDRESS: http://_____

TYPE: CORPORATION PROPRIETORSHIP PARTNERSHIP

TAX EXEMPT NO. (IF APPLICABLE;ATTACH TAX ID FORM): _____

YRS. IN BUSINESS: _____

OWNERS NAME OR PARTNER 1: _____

PARTNER 2 NAME: _____

PARTNER 3 NAME: _____

PAR
TNER 4 NAME: _____

MAIN ORDERING/BILLING CONTACT :

NAME: _____

TELEPHONE EXTENSION: _____

EMAIL: _____

SECONDARY ORDERING/BILLING CONTACT:

NAME: _____

TELEPHONE EXTENSION: _____

EMAIL: _____

MAXIMUM CREDIT: \$ 1,000.00

FULL PAYMENT DUE WITHIN: 15 DAYS FROM DATE OF INVOICE

SECTION B.

This credit application and agreement is submitted by the undersigned (hereafter Customer) to Programming Methods of Florida, Inc. (hereafter PMF), to obtain credit. Customer agrees to make payment in full to PMF for all amounts due according to PMF's invoice(s). Customer also agrees to pay PMF, as interest, an amount equal to 1 1/2% per month, or the maximum provided by law (whichever is less) for invoice amounts that are past due. Should Customer default in any such payment(s), PMF shall have the right, without notice to Customer, to declare all invoice amounts immediately due and payable. In the event the customer cannot under any circumstances or within a reasonable amount of time pay PMF for the balance(s) of said invoice(s) PMF reserves the right to at anytime reposes any equipment which at such time has not been fully paid for. In the event PMF should commence any action or actions, or otherwise seek to enforce this agreement against Customer or any Guarantor, Customer agrees to pay reasonable attorney(s) fees, court and other expenses incurred by PMF, whether or not suit is filed. This agreement is not transferable or assignable without prior written consent of PMF. This agreement shall become effective upon acceptance by PMF which shall be shown in section G. Customer agrees that all sales shall be governed by PMF's Standard Terms and Conditions of Sale, as stated on the invoice and shown on price quotes, unless PMF and Customer have executed a separate agreement which specifically supersedes and replaces those terms and conditions. Customer and Customer's authorized representative signing this agreement hereby represent and warrant that the information provided in this application and in any and all additional documents, financial statements or other information furnished by Customer to PMF is true and correct in all material respects and contains all information necessary so that this application is not materially misleading. Customer acknowledges that PMF is relying on the accuracy of the information provided by Customer. Customer hereby grants PMF a security interest in any and all goods purchased by Customer from PMF to secure any and all obligations of Customer to PMF, including but not limited to any obligation of payment. Customer agrees to execute any additional documents necessary to perfect or continue any security interest related to this application. Customer agrees to adhere to the credit service policies and procedures established from time to time by PMF. The principal(s) or partner(s) or proprietor of the Customer also agree(s) to provide PMF with a personal guaranty of liability at PMF's request, if said is not provided the Customer hereby agrees PMF may dissolve this agreement at such a time.

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____



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NET TERMS CREDIT APPLICATION

Please complete all five sections of this application. If you have any questions while completing this application please contact PMF at (772) 335-2262.

Thank you,

PMF

SECTION A.

PLEASE CHOOSE THE TERMS AND CREDIT LINE YOU ARE REQUESTING
TERMS REQUESTED: <input type="checkbox"/> NET 15 <input type="checkbox"/> NET 30 <input type="checkbox"/> NET 60
CREDIT LINE: <input type="checkbox"/> \$ 2,000.00 <input type="checkbox"/> \$ 3,000.00 <input type="checkbox"/> \$ 4,000.00 <input type="checkbox"/> \$ 5,000.00 <input type="checkbox"/> \$ 6,000.00 <input type="checkbox"/> \$ 8,000.00 <input type="checkbox"/> OTHER: \$ _____

SECTION B.

LEGAL NAME OF COMPANY: _____
 TRADE NAME (dba): _____
 BILLING/MAILING ADDRESS: _____
 CITY,STATE,ZIP: _____
 PHONE NO.: _____ FAX NO.: _____
 TIME AT ADDRESS: RENT OWN OTHER
 WEBSITE ADDRESS: http://_____
 TYPE: CORPORATION PROPRIETORSHIP PARTNERSHIP
 TAX EXEMPT NO. (IF APPLICABLE;ATTACH TAX ID FORM): _____
 YRS. IN BUSINESS: _____
 NATURE OF BUSINESS: _____
 ANNUAL SALES VOLUME: \$ _____

MAIN ORDERING/BILLING CONTACT :

NAME: _____
 TELEPHONE EXTENSION: _____
 EMAIL: _____

SECONDARY ORDERING/BILLING CONTACT:

NAME: _____
 TELEPHONE EXTENSION: _____

EMAIL: _____

SECTION C.

PRINCIPALS:

NAME: _____
TITLE: _____
SOCIAL SECURITY NO.: _____
ADDRESS: _____
E-MAIL ADDRESS: _____

NAME: _____
TITLE: _____
SOCIAL SECURITY NO.: _____
ADDRESS: _____
E-MAIL ADDRESS: _____

NAME: _____
TITLE: _____
SOCIAL SECURITY NO.: _____
ADDRESS: _____
E-MAIL ADDRESS: _____

NAME: _____
TITLE: _____
SOCIAL SECURITY NO.: _____
ADDRESS: _____
E-MAIL ADDRESS: _____

SECTION D.

BANK INFORMATION:

BANK NAME: _____
CONTACT & TITLE: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: _____
ACCOUNT #: _____
2nd ACCOUNT OR LOAN: _____

2nd BANK NAME: _____
CONTACT & TITLE: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: _____
ACCOUNT #: _____
2nd ACCOUNT OR LOAN: _____

3rd BANK NAME: _____
CONTACT & TITLE: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____
ACCOUNT #: _____
3RD ACCOUNT OR LOAN: _____

SECTION E.

This credit application and agreement is submitted by the undersigned (hereafter Customer) to Programming Methods of Florida, Inc. (hereafter PMF), to obtain credit. Customer agrees to make payment in full to PMF for all amounts due according to PMF's invoice(s). Customer also agrees to pay PMF, as interest, an amount equal to 1 1/2% per month, or the maximum provided by law (whichever is less) for invoice amounts that are past due. Should Customer default in any such payment(s), PMF shall have the right, without notice to Customer, to declare all invoice amounts immediately due and payable. In the event the customer cannot under any circumstances or within a reasonable amount of time pay PMF for the balance(s) of said invoice(s) PMF reserves the right to at anytime reposes any equipment which at such time has not been fully paid for. In the event PMF should commence any action or actions, or otherwise seek to enforce this agreement against Customer or any Guarantor, Customer agrees to pay reasonable attorney(s) fees, court and other expenses incurred by PMF, whether or not suit is filed. This agreement is not transferable or assignable without prior written consent of PMF. This agreement shall become effective upon acceptance by PMF which shall be shown in section G. Customer agrees that all sales shall be governed by PMF's Standard Terms and Conditions of Sale, as stated on the invoice and shown on price quotes, unless PMF and Customer have executed a separate agreement which specifically supersedes and replaces those terms and conditions. Customer and Customer's authorized representative signing this agreement hereby represent and warrant that the information provided in this application and in any and all additional documents, financial statements or other information furnished by Customer to PMF is true and correct in all material respects and contains all information necessary so that this application is not materially misleading. Customer acknowledges that PMF is relying on the accuracy of the information provided by Customer. Customer hereby grants PMF a security interest in any and all goods purchased by Customer from PMF to secure any and all obligations of Customer to PMF, including but not limited to any obligation of payment. Customer agrees to execute any additional documents necessary to perfect or continue any security interest related to this application. Customer agrees to adhere to the credit service policies and procedures established from time to time by PMF. The principal(s) or partner(s) or proprietor of the Customer also agree(s) to provide PMF with a personal guaranty of liability at PMF's request, if said is not provided the Customer hereby agrees PMF may dissolve this agreement at such a time.

The undersigned individual(s) who is (are) either a principal(s) or partner(s) of the above-named Customer or a sole proprietorship of the above-named Customer, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of Customer, hereby consents to and authorizes the use of a consumer credit report on the undersigned, by Programming Methods, Inc., the above-named business credit grantor, from time to time as may be needed, in the credit evaluation process. The undersigned authorizes release of all banking and credit information, both business and/or personal requested by Programming Methods, Inc. This form may be reproduced or photocopied and a faxed copy shall be as effective consent as the original which I have signed.

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

Dated at _____, as of this _____ day of _____, 20_____.
Signed by: _____ in his or her individual capacity.
Print Name: _____

SECTION F.

PERSONAL GUARANTY OF LIABILITY

I _____
residing at _____

I _____
residing at _____

I _____
residing at _____

I _____
residing at _____

For and in consideration of Programming Methods of Florida, Inc. (hereafter PMF) extending credit at my request to

_____ (hereafter Customer), hereby personally guarantee the payment to PMF in the state of Florida of any obligation of Customer and I hereby agree to bind myself to pay PMF on demand any sum which may become due to PMF by Customer, whenever Customer shall fail to pay the same. Further, I hereby subordinate any indebtedness of Customer which it may have to me to the indebtedness of Customer owed to PMF. Guarantor agrees to so pay and perform in accordance with the terms of the indebtedness and other contracts between Customer and PMF without requiring PMF to exercise, pursue or enforce any right or remedy PMF has against Customer, any co-guarantor (whether hereunder or under a separate instrument) or any other party. Guarantor hereby consents that from time to time PMF may, without notice to Guarantor and without affecting any liability of Guarantor, (a) exchange, release, sell (by foreclosure or otherwise), consent to the transfer of, apply or otherwise deal with any collateral for repayment of the indebtedness at the election of PMF, (b) refinance, extend, renew or accelerate the indebtedness or other obligations in whole or in part, (c) waive or fail to enforce any of its rights under any instruments evidencing, relating to or securing the indebtedness, or other obligations, or (d) settle, release (by operation of law or otherwise), compound, compromise, collect or liquidate, in any manner, any of the indebtedness or other obligations, or any indebtedness of any co-guarantor (whether hereunder or under a separate instrument) or any other party.

Guarantor acknowledges that all payments due hereunder are required to be made to PMF at PMF's above stated address in Saint Lucie County, Florida, and Guarantor further acknowledges that an appropriate forum for litigation with respect to the enforcement of this Personal Guaranty shall be in a court of competent jurisdiction in Saint Lucie County, Florida. Notwithstanding the place of residence of Guarantor or the place of execution of this Personal Guaranty, the laws of the State of Florida shall control the construction, interpretation and enforcement of this Personal Guaranty and all matters related to this Personal Guaranty, without application or reference to conflict of laws provisions.

It is understood that this Personal Guaranty is a general, continuing, absolute, unconditional and irrevocable guarantee and indemnity for such indebtedness of Customer, is enforceable by PMF, its successors and assigns, and is binding upon Guarantor and Guarantor's heirs and assigns and shall inure to the benefit of PMF's successors and assigns. Guarantor hereby waives notice of default, non-payment and notice hereof and consent to any modification or renewal of the indebtedness hereby guaranteed. If more than one person shall execute this Personal Guaranty, the singular shall include the plural and the terms "undersigned" and "Guarantor" shall mean all persons signing this Personal Guaranty, and each of them shall be jointly and severally obligated hereunder. All of PMF's rights and remedies hereunder are cumulative and not alternative.

EACH PARTY HEREBY WAIVES TRIAL BY JURY IN ANY ACTION, PROCEEDING, CLAIM, OR COUNTERCLAIM BROUGHT BY EITHER PARTY IN CONNECTION WITH ANY MATTER ARISING OUT OF

OR IN ANY WAY CONNECTED WITH THIS PERSONAL GUARANTY OR THE RELATIONSHIP OF PROGRAMMING METHODS, INC. AND GUARANTOR HEREUNDER.

It is understood by Guarantor that any defaults, failure to pay when due or credit experience on the part of Guarantor may be reported by PMF to a consumer credit reporting agency.

The undersigned Guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this Personal Guaranty, hereby consents to and authorizes the use of a consumer credit report on the undersigned Guarantor, by PMF as a business credit grantor, from time to time as may be needed, in the credit evaluation process.

Witness Signature: _____

Print Name: _____

Date: _____

Witness Signature: _____

Print Name: _____

Date: _____

Witness Signature: _____

Print Name: _____

Date: _____

Witness Signature: _____

Print Name: _____

Date: _____

Guarantor: _____

Print Name: _____ ("Guarantor")

SSN#: _____

Home Address: _____

Date: _____

Guarantor: _____

Print Name: _____ ("Guarantor")

SSN#: _____

Home Address: _____

Date: _____

Guarantor: _____

Print Name: _____ ("Guarantor")

SSN#: _____

Home Address: _____

Date: _____

Guarantor: _____

Print Name: _____ ("Guarantor")

SSN#: _____

Home Address: _____

Date: _____