



DATE: \_\_\_\_\_  
 BRANCH & ACCT MGR: \_\_\_\_\_  
 PROSPECT #: \_\_\_\_\_  
 UNIT COUNT: \_\_\_\_\_  
 LEAD TRACKING #: \_\_\_\_\_

**MULTI FAMILY ACCOUNT SET UP AGREEMENT**

10101 FOUNTAINGATE DRIVE STAFFORD, TX  
 (832) 310-2000  
 CREDIT@REDICARPET.COM

Property Name \_\_\_\_\_

Ship To Address \_\_\_\_\_

Bill To Address \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

PO Required: YES \_\_\_\_\_ No \_\_\_\_\_ Credit Line Requested \_\_\_\_\_

Is the property tax exempt? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please attached a signed exempt certificate.

Email address for E-Invoicing \_\_\_\_\_

Portal Platform (OPS, Yardi, Nexus, Ect.) \_\_\_\_\_

Management Company \_\_\_\_\_

Management Address \_\_\_\_\_

A/P Contact \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

Ownership Name \_\_\_\_\_

Ownership Address \_\_\_\_\_

I, (WE) UNDERSTAND THAT THE INFORMATION FURNISHED TO YOU ON THIS APPLICATION FOR ACCOUNT IS FOR THE PURPOSE OF OBTAINING CREDIT FROM YOUR FIRM. I (WE) UNDERSTAND THAT YOUR FIRM MAY AT ANY TIME REFUSE TO GRANT CREDIT TO ME, US, EVEN THOUGH CREDIT IS INITIALLY GRANTED PURSUANT TO THIS APPLICATION. I AM (WE ARE) AUTHORIZED IN MY (OUR) CAPACITY TO BIND MY (OUR) FIRM FOR ANY AND ALL CREDIT WHICH YOU EXTEND TO US. IT IS FURTHER AGREED AND UNDERSTOOD THAT ALL THE ACCOUNTS OR MONIES DUE REDI-CARPET INC. SHALL BE DUE AND PAYABLE AT P.O. BOX 971442 DALLAS, TX 75397 WITH IN THIRTY (30) DAYS OF INSTALLATION; THAT ALL PAST DUE ACCOUNTS, NOTES, OR JUDGMENTS SHALL BEAR INTEREST FROM THE DATE THE INDEBTEDNESS IS FIRST INCURRED UNTIL PAID AT THE MAXIMUM RATE ALLOWED BY LAW. IF THE ACCOUNT OR NOTES ARE PLACED WITH A THIRD PARTY FOR COLLECTION, THEN THE DEBTOR AND HIS GUARANTORS, IF ANY ARE LIABLE FOR REASONABLE ATTORNEY'S FEES AND ALL REASONABLE COSTS INCURRED IN THE COLLECTION OF THE INDEBTEDNESS.

NOTICE: THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT (ECOA) PROHIBITS CREDITORS FROM DISCRIMINATING AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS, AGE (PROVIDED THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT); BECAUSE ALL OR PART OF THE APPLICANT'S INCOME DERIVES FROM ANY PUBLIC ASSISTANCE PROGRAM; OR BECAUSE THE APPLICANT HAS, IN GOOD FAITH, EXERCISED ANY RIGHT UNDER THE CONSUMER CREDIT PROTECTION ACT. THE FEDERAL AGENCY THAT ADMINSTERS COMPLIANCE WITH LAW CONCERNING THIS CREDITOR IS THE FEDERAL TRADE COMMISSION, DIVISION OF CREDIT PRACTICES, 600 PENNSYLVANIA AVENUE, NW WASHINGTON DC 20580.

SIGNATURE \_\_\_\_\_

NAME (PRINTED) \_\_\_\_\_

TITLE \_\_\_\_\_

COMPANY \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

DATE \_\_\_\_\_