

Please fax application to 925.453.6946 or email to ar@brucestire.com For questions, call our corporate office at 925.337.8089

APPLICATION F	OK CKEDII	San Jose, CA 951 T 408.335.6171	12 Gilroy, CA 95020 T 408.842.0710	Livermore, CA 94551 T 925.453.0006	Los Banos, CA 93635 T 209.826.1269	
Date		F 408.295.0192	F 408.842.6959	F 925.443.8475	F 209.826.8094	
Firm Name			Credit Limit Desired	<b>:</b>		
DBA			1000		I . I I . / II . Pr	
Address			I (We) hereby apply for open credit, and give permission to Bruce's Tire, Inc. to check any/all credit references including the investigation of personal credit information as deemed appropriate and			
City			necessary to grant credit. When such	credit is extended, I (we) agree th	at all invoices will be paid	
Tel			by the 10th of the month following s not paid by the 25th, it will become			
Partnership C		vner	(18% per annum) to be applied to the delinquent balance. I (We) further understand and agree			
Name			to pay any/all attorney and/or collection fees in the event such an action is taken by Bruce's Tire, Inc.			
Residence Address			Signature	Date	1	
City	ST Zip		I/We have supplied the req	uested information and I	/we understand	
SS#			and agree to the following			
Resale #			hereto shall be governed by the laws	s of the State of California. Buyers a	gree that said contract is not	
Year Business Started Sta	ite & Year Incorporated		deemed acceptable until approval had County of Alameda, State of California			
A P Contact	Contact Tel			Stoneridge Drive, Pleasanton, CA. I/We hereby agree to pay reasonable collections costs, attorney's		
Email for electronic invoicing			fees and court costs, if necessary to cone and one-half percent (1.5%) per		o pay a finance charge of	
Purchase Order required? Yes	No			·		
			Signature	Date		
SUPPLIER REFERENCE	S		Print Name and Title			
Company Name			1 For value received the undersigne	d harain called guaranters idintly	and coverally unconditionally	
Address			1. For value received, the undersigne guarantee and promise to pay Bruce			
City			incurred on or after		,20 by	
Tel	Fax		(your company name)			
Contact	Email		herein called "Buyer", by reason of the			
			<ol><li>Guarantors understand and agree provided for in this instrument, shall</li></ol>			
Company Name			actions that shall either continue the			
Address			been satisfied.			
City	ST Zip		3. This guaranty shall terminate on delivery to Seller, at the address set forth above, of notice and termination effective as to any and all indebtedness incurred or created by Buyer from and after such delivery of notice of termination.			
Tel						
Contact	Email					
			Principals			
Company Name			Name	SS#		
Address			Cinn atom	Dete		
City	ST Zip		Signature	Date		
Tel	Fax		Signature	Date		
Contact	Email		NOTE C			
BANK			NOTE: Spouses must sign in Sole Propri	ety		
Name			Signature	Title		
Address			Date			
Tel						
	//CC#		we it in the reopie be	M3111C33: 31#/3r		

Oakland

Commercial Truck Center

240 Hegenberger Road

Oakland, CA 94621

T 510.567.8473

F 510.569.0373

7700 Monterey St.

☐ Gilroy

San Jose

**Commercial Truck Center** 

San Jose, CA 95112

1315 N. 10th Street

T 408.295.1742

F 408.280.7902

■ San Jose

1136 Old Bayshore Hwy.

**□** Fremont

**Commercial Truck Center** 

2420 Prune Avenue

Fremont, CA 94539

T 510.651.4701

F 510.651.3758

**□** Livermore

6144 Industrial Way, A

■ Hayward

2416 Whipple Road

Hayward, CA 94544

T 510.324.0200

F 510.324.0202

■ Los Banos

205 W. Pacheco Blvd.