

MONRO MUFFLER / BRAKE INC.
CHARGE ACCOUNT APPLICATION FORM

MARKET \_\_\_\_\_

SHOP \_\_\_\_\_

GENERAL INFORMATION:

- 1. Name of Individual or Company Name (d/b/a):
2. Legal Name of Company(if same as #1, write "Same"):
3. Type of Ownership: [ ] Corporation or Limited Liability Company (State ) [ ] Partnership [ ] Individual
4. Billing Address: Phone # ( ) Fax # ( )
Sales Tax exempt? [ ] Yes (attach certificate)
Attn: Payment made [ ] per invoice [ ] per monthly statement
Number of Vehicles to service
5. Location of local branch or division (if same as #4, write "same"):
Street / P.O. Box City State Zip
6. Name and residence of owners or principals:
Name Title
Address: City State Zip
Name Title
Address: City State Zip
7. Name of individual(s) authorized to request repair work:
Title Phone #

CREDIT REFERENCES:

Table with 4 columns: NAME, LOCATION, BANK ACCOUNT # / CONTACT NAME, PHONE #. Rows for Bank, Supplier #1, Supplier #2, Supplier #3.

ATTENTION: Commercial/Wholesale Customers Requesting Credit Terms

We are pleased to extend charge account privileges to any qualified customer desiring this convenience. MONRO is committed, however, to maintaining competitive pricing through reduction of all unnecessary operating expenses including account collection costs.

By submitting this application, the Company agrees to pay for all invoices on which credit was extended per our terms of Net 30 days. Upon the Company's failure to make a timely payment, MONRO may apply the highest allowable monthly finance charge rate to the unpaid balance of the account, and to seek prompt recourse to the fullest extent allowed by law.

Company: Date:
By: Title:

GUARANTY:

The undersigned, [each] being an owner or principal in the Company, hereby (i) guarantees to MONRO the full, prompt and punctual payment of all invoices payable by the Company and (ii) agrees and understands that MONRO may proceed to exercise its rights under this Guaranty without first pursuing or exhausting its rights and remedies against the Company or any other person or entity.

ATTN: MONRO MANAGERS (Account will be approved or denied in Monro's sole discretion, after receipt of properly completed application)
Comments:

FOR MAIN OFFICE USE ONLY
Reviewed By: Date: Approved [ ]
Accounting Supervisor: Date: Approved [ ]
Zone Manager: Date: Approved [ ]
Chief Financial Officer: Date: Approved [ ]