



1978 HOOD BLVD STE. 100  
HATTIESBURG, MS 39401

BRANCH \_\_\_\_\_  
SALESMAN # \_\_\_\_\_

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### HOOD DISTRIBUTION COD APPLICATION

INCOMPLETE INFORMATION WILL CAUSE DELAYS... PLEASE COMPLETE IN FULL

NAME: \_\_\_\_\_ PHONE \_\_\_\_\_  
(AS REGISTERED WITH STATE DEPT. OF TAXATION) FAX \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
ADDRESS (STREET OR PO BOX) CITY STATE ZIP

SHIPPING ADDRESS: \_\_\_\_\_  
ADDRESS (STREET OR PO BOX) CITY STATE ZIP

EMAIL: \_\_\_\_\_  
(TO RECEIVE STATEMENTS & INVOICES)

OWNER OR OFFICER (PRINT): \_\_\_\_\_

OWNER OR AGENT DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

OWNER OR AGENT SOCIAL SECURITY # \_\_\_\_\_

SALES TAX EXEMPTION # \_\_\_\_\_  
(PLEASE FURNISH CERTIFICATE)

BANK: \_\_\_\_\_  
NAME PHONE

ADDRESS (STREET OR PO BOX) CITY STATE ZIP

BANK ACCOUNT # \_\_\_\_\_

#### BANK AUTHORIZATION

I/ We, hereby authorize the above bank to disclose any and all information needed for the completion of this application for check writing purposes only to Hood Distribution. And acknowledge that Hood Distribution's Policy of using electronic payment (ACH debits) technology for movement of funds at every available opportunity. In accordance with this policy, checks received by Hood Distribution as payment for goods and/or services provided may be used for payment or used solely for the purpose of capturing the bank routing and account information for the depository financial institution named thereon. Hood Distribution reserves the right to subsequently initiate an ACH debit entry to the payer's checking account. If you desire not to participate with this policy, it is imperative that you inform us in writing at the time of receipt of this application.

AUTHORIZED SIGNATURE: \_\_\_\_\_

#### PERSONAL CONTINUING GUARANTY

The undersigned unconditionally guarantees payment of an amounts including interest, NSF check fees, collection fees, attorney's fees, or any other cost incurred pursuant to the above Purchase by Check application. The undersigned waives any disability or defense of applicant or the right to protest, demand, dishonors of any kind guarantee. This is a continuing guarantee and shall not be revoked except by written notice to Hood Distribution. I understand that by signing this guarantee, I am agreeing to personally make good any company or personal check that was issued as a result of this Purchase by Check agreement.

By my signature I hereby authorize and give permission to Hood Distribution to run a full investigation of my credit history, including, but not limited to, obtaining a consumer credit report.

NAME (PRINT) SIGNATURE (WET SIGNED) SSN DATE

#### OTHER CONTACT INFORMATION:

ACCOUNTS PAYABLE  
TITLE NAME EMAIL

PURCHASING  
TITLE NAME EMAIL

TITLE (OTHER CONTACT) NAME EMAIL

PLEASE PROVIDE A NAME AND EMAIL WE CAN CONTACT FOR MARKETING PURPOSES:

NAME EMAIL

**PLEASE ATTACH YOUR RESALE CERTIFICATE**