

Wm. Zall & Sons, Inc.

PO Box 850242 • 65 Baystate Drive #20 • Braintree, MA 02185 • Ph. 781-848-8088 • Fax 781-356-0599

Personal Guaranty

Guarantor's Name - Last:		First:	Middle Initial:	
Guarantor's Relationship to Applicant (i.e. Owner, Partner, etc.):				
Guarantor's Home Address:				
City:	State:	ZIP:	Phone:	Email:
Driver's License No:		State of Issuance:		Expiration Date:
<p>To induce Wm Zall & Sons ("Zall") to extend credit to the above named applicant(s), the undersigned ("Guarantor") as owner or someone having a financial interest in the Applicant, hereby individually, personally absolutely and unconditionally guarantees payment when due of all accounts, including service charges, payable by the Applicant to Zall. My obligation hereunder is joint and several with any other guarantor hereto. Any revocation of charging privileges shall not affect this guaranty with respect to the amount owed before receipt of notice by Zall. Notice of acceptance, default and non-payment are waived. This guaranty shall be a continuing and irrevocable guaranty and indemnity of the indebtedness of the Applicant to Zall. The Guarantor, without notice, consents to any modification, extension and/or renewal of the within credit agreement hereby guaranteed. If the Applicant fails to pay when due, Zall may proceed against the Guarantor without notice and without first proceeding against the Applicant or other guarantor to exercise all legal remedies to collect the balance due. I agree to pay your reasonable attorneys' fees and collection costs if necessary to enforce this guaranty. A signed copy of this agreement, including copies transmitted by email or facsimile, and upon being so executed, shall be effective as if all signatures appeared on the original Personal Guaranty.</p>				
_____ Guarantor (print name)		_____ Guarantor (signature)		_____ Date

Application Instructions

Please complete all relevant sections of this application, and submit along with the following documents:

- 1.) Completed form ST-4 (or photocopy of MA Dept. of Revenue issued "Sales and Use Tax Registration")
- 2.) Photocopy of Massachusetts State Cigarette License, form CT-3T issued by the Dept. of Revenue
- 2.) Photocopy of Guarantor's driver's license