



44 Tunkhannock Ave • Exeter, PA 18643
 Phone: 1-800-432-8063
 E-mail: CanadaNewAccounts@LKQCorp.com

CUSTOMER APPLICATION & CREDIT AGREEMENT

Part A of this application is intended for creating a customer account with Keystone Automotive Operations. If you would like to apply for any Terms other than Prepaid Credit Card, please complete the Credit Information Section in Part B, page 2.

**BOTH PAGES of the Application MUST BE SUBMITTED with signature for the Application to be processed.

Check Payment Terms Requested:	<input type="checkbox"/> Prepaid Credit Card	<input type="checkbox"/> COD	<input type="checkbox"/> Monthly Terms	<input type="checkbox"/> Bi-Weekly Terms	<input type="checkbox"/> Weekly Terms	
PART A - COMPANY INFORMATION (Required)						
GENERAL BUSINESS INFORMATION	Business Name (Full Legal Name): _____					
	D/B/A or Trade Name (if any): _____					
	Shipping Address: _____					
				City	State/Province	Zip/Postal Code
	Billing Address: _____					
				City	State/Province	Zip/Postal Code
	() _____		() _____		_____	
	Primary Phone #	Secondary Phone #	Primary Email		Secondary Email	
	Website Address: _____					
	Business Type (check all that apply): <input type="checkbox"/> Storefront <input type="checkbox"/> E-Commerce : <input type="checkbox"/> Installer <input type="checkbox"/> Dealership					
GST #: _____ PST # _____ HST or QST # _____						
\$ _____ \$ _____ _____						
Annual Revenues	Expected Monthly KAO Purchases	# of Employees	# of Install Bays	Estimated Square Footage		
Primary Business Focus: <input type="checkbox"/> Car/Truck/Off-Road <input type="checkbox"/> 12 Volt/Audio <input type="checkbox"/> Towing & Trailer <input type="checkbox"/> Auto Repair & Collision <input type="checkbox"/> Other						
_____		() _____		() _____		
Authorized Buyer Name(s)	Buyer Phone #	Buyer Fax #		Buyer Email		
_____		() _____		() _____		
Accounts Payable Contact(s)	Accounts Payable Phone #	Accounts Payable Fax #		Accounts Payable Email		
Ownership: <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/> L.L.C <input type="checkbox"/> Corporation <input type="checkbox"/> S Corporation						
OWNERSHIP	_____		() _____		_____	
	Name of Principal(s)	Title	Phone		% of Ownership	
	_____		() _____		_____	
	Name of Principal(s)	Title	Phone		% of Ownership	



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PART B - REQUEST FOR CREDIT *(Required only if applying for terms other than Prepaid Credit Card)*

Information provided in the Credit Application Section will be used by LKQ Corporation and/or one of its subsidiaries or affiliates ("LKQ") solely for the purpose of extending credit. Attach a separate sheet with additional information if necessary.

HISTORY	Facilities:	Rent	Own	_____	_____
				Business Owned Since	# of Years at Present Location
	Have You Ever Filed for Bankruptcy?:	Yes	No	Is Your Business a Franchise?:	Yes No
BANK REFERENCE	Bank Name	Complete Address			Business Account Type:
	Account Manager to Contact	Email			_____ Checking
	() _____	() _____	Date Account Established		_____ Savings
	Phone	Fax			_____ Overnight Clearing
TRADE REFERENCES	Business Name	Contact Name	() _____	() _____	_____
			Phone	Fax	Email
	Business Name	Contact Name	() _____	() _____	_____
			Phone	Fax	Email
	Business Name	Contact Name	() _____	() _____	_____
			Phone	Fax	Email

PART C - PERSONAL GUARANTEE:

To induce LKQ to extend credit to the above Applicant, the undersigned ("Guarantor"), hereby guarantees payment of any and all of Applicant's indebtedness to LKQ under this credit agreement or otherwise under applicable law. Any revocation of Applicant's credit privileges shall not affect the guaranty with respect to amounts owed before receipt of the notice of revocation by LKQ. Notices of acceptance, default and nonpayment are hereby waived. This guaranty shall be a continuing and irrevocable guaranty and indemnity for indebtedness of Applicant to LKQ. Guarantor consents to any modification, extension and/or renewal of the credit agreement hereby guaranteed without notice. If the Applicant fails to pay the account when due, LKQ may proceed against Guarantor to collect any and all amounts due from Applicant, without notice to Guarantor and without first proceeding against Applicant. Guarantor agrees that the laws of the State of Illinois shall govern this credit agreement and guaranty, and that any and all disputes arising from or related to this agreement or guaranty shall be litigated exclusively in state or federal court located in Chicago, Illinois, to whose jurisdiction Guarantor irrevocably consents.

Guarantor's Name (Print): _____ Guarantor's Signature: _____

PART D - TERMS & CONDITIONS *(Required for all applications):*

With its signature below, Applicant (i) certifies that all information contained herein is true and correct and that it is engaged in a commercial activity, (ii) grants permission to LKQ Corporation and its subsidiaries (collectively, "LKQ") to obtain independent credit reports or credit reports and other information from its references and bank, (iii) authorizes the credit references and bank reference(s) to release information to LKQ that may be used to determine credit worthiness, and (iv) agrees to pay all bills, invoices, and account statements rendered in full within ten (10) calendar days after receipt by Applicant. Any past due account is subject to being placed on collect-on-delivery (C.O.D.) until paid in full. Repeated late payments could result in revocation of Applicant's credit privileges, which LKQ may revoke in its sole and absolute discretion. Applicant agrees to pay a service charge of 2.0% per month on balances not timely paid. Applicant also agrees to pay all of LKQ's reasonable fees and expenses incurred in collecting past due balances, including but not limited to LKQ's reasonable attorneys' fees, court costs, litigation expenses, and/or collection agency fees and expenses. This credit agreement and all other agreements and contracts between Applicant and LKQ shall be governed by the laws of the State of Illinois. Any and all disputes arising from or related to this credit agreement shall be litigated exclusively in state or federal court located in Chicago, Illinois, to whose jurisdiction Applicant irrevocably consents.

Date: _____ Name (Print): _____

Title: _____ Signature: _____

THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT 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 ADMINISTERS COMPLIANCE WITH THIS LAW CONCERNING THIS CREDITOR IS FEDERAL TRADE COMMISSION, EQUAL CREDIT OPPORTUNITY; WASHINGTON, D.C. 20580.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact KAO via e-mail at CreditTeam@LKQCorp.com within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request.