

CREDIT APPLICATION

COMPANY NAME> \_\_\_\_\_ TODAY'S DATE> \_\_\_\_\_
BILLING ADDRESS> \_\_\_\_\_ DATE \_\_\_\_\_
SHIP TO ADDRESS> \_\_\_\_\_ BUSINESS BEGAN> \_\_\_\_\_
PHONE #> \_\_\_\_\_ TYPE OF OF BUSINESS> \_\_\_\_\_ STATE INCORPORATED> \_\_\_\_\_
FEDERAL I. D. #> \_\_\_\_\_
PROPRIETORSHIP[ ] PARTNERSHIP> GENERAL[ ] LIMITED[ ] CORPORATION[ ] SUBSIDIARY OF>

PERSONAL INFORMATION

OWNER/OFFICER> \_\_\_\_\_ OWNER/OFFICER> \_\_\_\_\_
SOCIAL SECURITY #> \_\_\_\_\_ SOCIAL SECURITY #> \_\_\_\_\_
TITLE> \_\_\_\_\_ TITLE> \_\_\_\_\_
HOME ADDRESS> \_\_\_\_\_ HOME ADDRESS> \_\_\_\_\_
CITY> \_\_\_\_\_ STATE> \_\_\_\_\_ ZIP> \_\_\_\_\_ CITY> \_\_\_\_\_ STATE> \_\_\_\_\_ ZIP> \_\_\_\_\_
HOME PHONE #> \_\_\_\_\_ HOME PHONE \_\_\_\_\_
DRIVER LICENSE #> \_\_\_\_\_ DRIVERS LICENSE #> \_\_\_\_\_

BANKING INFORMATION

NAME OF BANK> \_\_\_\_\_ TELEPHONE #> \_\_\_\_\_
NAME OF BANKER> \_\_\_\_\_ LOCATION \_\_\_\_\_ ACCOUNT #> \_\_\_\_\_

TRADE REFERENCES

COMPANY> \_\_\_\_\_ COMPANY> \_\_\_\_\_
ADDRESS> \_\_\_\_\_ ADDRESS> \_\_\_\_\_
CITY> \_\_\_\_\_ STATE> \_\_\_\_\_ ZIP> \_\_\_\_\_ CITY> \_\_\_\_\_ STATE> \_\_\_\_\_ ZIP> \_\_\_\_\_
PHONE NUMBER> \_\_\_\_\_ PHONE NUMBER> \_\_\_\_\_
COMPANY> \_\_\_\_\_ COMPANY> \_\_\_\_\_
ADDRESS> \_\_\_\_\_ ADDRESS> \_\_\_\_\_
CITY> \_\_\_\_\_ STATE> \_\_\_\_\_ ZIP> \_\_\_\_\_ CITY> \_\_\_\_\_ STATE> \_\_\_\_\_ ZIP> \_\_\_\_\_
PHONE NUMBER> \_\_\_\_\_ PHONE NUMBER> \_\_\_\_\_

TERMS: Credit terms are net 10 days. Invoices not paid within 10 days of invoice date will be assessed a 2% per month Finance Charge. [In accordance with the Usury laws of the state]. I/we understand and agree that the information provided is for the purpose of obtaining credit. I/we further understand and agree that all accounts or monies due to Spray Foam Distributors of NE Inc. shall be paid in accordance with the Credit Terms stated above and agree to pay all reasonable costs of collection, in addition to any court costs and/or attorney fees incurred. I/we authorize investigation of all credit references and credit history. I/we authorize creditors to release information pertaining to my/our credit history. I/we further authorize investigation of my/our credit via credit bureau reports.

Authorized By:

BY: \_\_\_\_\_ TITLE> \_\_\_\_\_ DATE> \_\_\_\_\_
BY: \_\_\_\_\_ TITLE> \_\_\_\_\_ DATE> \_\_\_\_\_

Guaranty: I/we, the undersigned, do hereby guarantee payment, as individuals, of any indebtedness incurred by virtue of any and all credit extended in accordance with the above agreement and all of its terms & conditions.

Guarantor: \_\_\_\_\_, Individually Date> \_\_\_\_\_
Guarantor: \_\_\_\_\_, Individually Date> \_\_\_\_\_