

MODERN MACHINE SHOP, INC.

CREDIT APPLICATION

| COMPANY NAME: | | PHONE: |
|---|------------------------|-----------------------------|
| STREET ADDRESS: | | FAX: |
| CITY: | STATE: | ZIP: |
| BILLING ADDRESS (IF DIFFERENT FROM A | ABOVE): | |
| CITY: | STATE: | ZIP: |
| EMAIL: | CREDIT LINE SOL | UGHT: |
| COMPANY IS A: \square CORPORATION \square PAF | RTNERSHIP PROPRIET | ORSHIP □ L.L.C. □ P.L.C. |
| CORPORATE REGISTRATION NO | V.A.T. NO | ANNUAL SALES |
| ARE FINANCIAL STATEMENTS AVAILABLE | ? □YES □NO NO. OF | YEARS IN BUSINESS |
| NOTE: IF IN BUSINESS LESS THAN | I FIVE YEARS, YOU MUST | COMPLETE PERSONAL GUARANTEE |
| ACCOUNTS PAYABLE CONTACT: | E-M | IAIL: |
| COMPANY D | DIRECTORS/OFFIC | CERS/PRINCIPAL |
| NAME 1: | | TITLE: |
| HOME ADDRESS: | | PHONE: |
| NAME 2: | | TITLE: |
| HOME ADDRESS: | | PHONE: |
| NAME 3: | | TITLE: |
| HOME ADDRESS: | | PHONE: |
| | BANKING DETAI | ILS |
| BANK NAME: | | ACCOUNT #: |
| BRANCH ADDRESS: | CITY/STATE/ZIP | : |
| BANK CONTACT NAME: | | PHONE: |
| | | |
| | TRADE REFERENC | CES |
| VENDOR 1: | CONTACT: | |
| PAYMENT ADDRESS: | CITY/STATE/ZIP | : |
| PHONE: | FAX: | ACCOUNT #: |
| VENDOR 2: | CONTACT: | |
| | | : |
| PHONE: | FAX: | ACCOUNT #: |
| VENDOR 3: | CONTACT: | |
| PAYMENT ADDRESS: | CITY/STATE/ZIP | : |
| PHONE: | FAX: | ACCOUNT #: |

CONDITIONS (TERMS ARE NET 30 DAYS UPON CREDIT APPROVAL)

TERMS OF SALE, INCLUDING TERMS OF PAYMENT AND CHARGES, FOR EACH PURCHASE ARE AGREED TO BE THOSE SPECIFIED ON THE FACE OF EACH INVOICE. THE CUSTOMER HEREBY AGREES TO PAY ALL COSTS OF COLLECTION OR LEGAL FEES SHOULD SUCH ACTION BE NECESSARY DUE TO NON-PAYMENT. THE ABOVE INFORMATION IS WILLINGLY SUPPLIED AND THE CREDITOR IS AUTHORIZED TO CONTACT THE ABOVE BANK AND TRADE REFERENCES IN ORDER TO ESTABLISH THE CREDITWORTHINESS OF THE ABOVE NAMED COMPANY. IF THE APPLICANT IS NOT A CORPORATION, THE CREDITOR IS AUTHORIZED TO OBTAIN CREDIT REPORTS ON THE PROPRIETORS, PARTNERS OR PRINCIPALS. SHOULD A CREDIT AVAILABILITY BE GRANTED BY THE CREDITOR, ALL DECISIONS WITH RESPECT TO THE EXTENSION OR CONTINUATION SHALL BE IN THE SOLE DISCRETION OF THE CREDITOR. THE CREDITOR MAY TERMINATE ANY CREDIT AVAILABILITY WITHIN ITS SOLE DISCRETION. PAYMENT FOR SERVICES WILL BE DUE IN THIRTY (30) DAYS FROM THE DATE THE SERVICE IS PROVIDED, INTEREST WILL ACCRUE ON AMOUNTS OWED AND NOT PAID WITHIN THIRTY (30) DAYS OF SERVICE AT THE RATE OF 18% PER ANNUM, UNLESS CHARGING SUCH AMOUNT WOULD CONSTITUTE USURIOUS INTEREST, IN WHICH CASE INTEREST WLL BE CHARGED AT THE HIGHEST RATE ALLOWED BY LAW.

| I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM: | | |
|--|--|--|
| APPLICANT'S NAME: | TITLE: | |
| DATE: | APPLICANT'S SIGNATURE: | |
| | DA DINIEDS S CODDODATIONIS INI THE H S | |
| | RS, PARTNERS, S-CORPORATIONS IN THE U.S. | |
| I AUTHORIZE THE SELLER AND THEIR A | ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT ON MY CREDIT HISTORY. | |
| DATE | ADDI ICANITIC CICNATUDE. | |
| DATE: | APPLICANT'S SIGNATURE: | |
| | | |
| | PERSONAL GUARANTEE | |
| PROMPT PAYMENT OF ALL INDEBTED GUARANTEE SHALL NOT BE AFFECTEI INDEBTEDNESS. NOTICE OF THE ACCE PAYMENT, AND ANY RIGHT OR DEM GUARANTEE MAY ONLY BE REVOKED E CERTIFIED MAIL. ANY REVOCATION DO INDEBTEDNESS INCURRED PRIOR TO | ATION DO HEREBY INDIVIDUALLY AND PERSONALLY GUARANTEE THE FULL AND DNESS HERETOFORE OR HEREAFTER INCURRED BY THE ABOVE BUSINESS. THIS DBY THE AMOUNT OF CREDIT EXTENDED OR ANY CHANGE IN THE FORM OF SAID PTANCE OF THIS GUARANTEE, EXTENSION OF CREDIT, MODIFICATION IN TERMS OF AND TO PROCEED AGAINST THE PRINCIPAL DEBTOR IS HEREBY WAIVED. THIS BY WRITTEN NOTICE, WHICH SHALL BE SENT TO THE CREDITOR'S CREDIT OFFICE BY ES NOT REVOKE THE OBLIGATION OF THE GUARANTORS TO PROVIDE PAYMENT FOR THE REVOCATION. I AUTHORIZE THE SELLER AND THEIR ASSIGNS TO OBTAIN A CONTACT MY REFERENCES AS NECESSARY. AS GUARANTOR, I AM ALSO BOUND BY | |
| GUARANTOR'S NAME: | SIGNATURE: | |
| HOME ADDRESS: | CITY/STATE/ZIP: | |
| DATE: | TAX I.D. OR S.S. NO: | |
| GUARANTOR'S NAME: | SIGNATURE: | |
| HOME ADDRESS: | CITY/STATE/ZIP: | |
| DATE: | TAX I.D. OR S.S. NO: | |