

WHOLESALE SHEET METAL INC.  
800 SOUTHWEST BOULEVARD  
PO BOX 3153  
KANSAS CITY, KANSAS 66103  
PHONE 913-432-7100  
FAX 913-432-9759

APPLICATION FOR CREDIT

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ DATE BUSINESS BEGAN: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_ DO YOU PAY SALES TAX: YES NO

TAX EXEMPTION #: \_\_\_\_\_ STATE ISSUING EXEMPTION: \_\_\_\_\_

OPERATE AS: CORP INDIVIDUAL PARTNERSHIP FED ID# \_\_\_\_\_

OWNER: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

OWNER: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

COMMERCIAL CREDIT REFERENCES

BANK NAME: \_\_\_\_\_  
BANK ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

BANK PHONE #: \_\_\_\_\_  
ACCOUNT #: \_\_\_\_\_  
OFFICER: \_\_\_\_\_

VENDOR NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_  
FAX #: \_\_\_\_\_  
ACCOUNT #: \_\_\_\_\_

VENDOR NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_  
FAX #: \_\_\_\_\_  
ACCOUNT #: \_\_\_\_\_

VENDOR NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_  
FAX#: \_\_\_\_\_  
ACCOUNT #: \_\_\_\_\_

AUTHORIZATION STATEMENT

I, WE THE UNDERSIGNED, BEING THE OWNER, OR PRINCIPAL STOCKHOLDER OF THE COMPANY ABOVE WHO HAVE MADE APPLICATION FOR CREDIT WITH YOU, HEREBY AGREE FOR VALUABLE CONSIDERATION TO UNCONDITIONALLY INDEMNIFY YOU FOR ANY AND ALL OF ITS OBLIGATIONS, AND TO PAY WHEN DUE, FOR ALL MERCHANDISE DELIVERED BY YOU, AND I, WE DO AGREE TO WAIVE NOTICE OF DEFAULT, HEREBY GIVING YOU THE RIGHT TO EXTEND THE TIME OF PAYMENT WITHOUT LIMITATIONS AND DO INDIVIDUALLY AND SEVERALLY AGREE TO BE PERSONALLY LIABLE FOR THE OBLIGATIONS OF ANY MERCHANDISE OR CREDIT EXTENDED BY YOU. I, WE AUTHORIZE WHOLESALE SHEET METAL THE RIGHT TO INVESTIGATE ANY AND ALL INFORMATION GIVEN ON THIS CREDIT APPLICATION.

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

DATE: \_\_\_\_\_

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PERSONAL GUARANTEE

THE UNDERSIGNED, FOR CONSIDERATION DO HEREBY INDIVIDUALLY AND PERSONALLY GUARANTEE THE FULL AND PROMPT PAYMENT OF ALL INDEBTEDNESS HERETOFORE OR HEREAFTER INCURRED BY THE ABOVE BUSINESS. THIS GUARANTEE SHALL NOT BE AFFECTED BY THE AMOUNT OF CREDIT EXTENDED OR ANY CHANGE IN THE FORM OF SAID INDEBTEDNESS. NOTICE OF THE ACCEPTANCE OF THIS GUARANTEE, EXTENSION OF CREDIT, MODIFICATION IN TERMS OF PAYMENT, AND ANY RIGHT OR DEMAND TO PROCEED AGAINST THE PRINCIPAL DEBTOR IS HEREBY WAIVED. THIS GUARANTEE MAY ONLY BE REVOKED BY WRITTEN NOTICE WHICH SHALL BE SENT TO THE CREDITOR'S CREDIT OFFICE BY CERTIFIED MAIL. ANY REVOCATION DOES NOT REVOKE THE OBLIGATION OF THE GUARANTORS TO PROVIDE PAYMENT FOR INDEBTEDNESS INCURRED PRIOR TO THE REVOCATION. I AUTHORIZE THE SELLER AND THEIR ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT AND TO CONTACT MY REFERENCES AS NECESSARY. AS GUARANTOR, I AM ALSO BOUND BY THE ABOVE ARBITRATION CLAUSE.

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: \_\_\_\_\_