

WHOLESALE SHEET METAL 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 P	ARTNERSHIP FED ID#
OWNER:	OWNER:
HOME ADDRESS:CITY/STATE/ZIP:	HOME ADDRESS:CITY/STATE/ZIP:
COMMMERC	CIAL CREDIT REFERENCES
BANK NAME:	BANK PHONE #:
BANK ADDRESS:	ACCOUNT #:
CITY/STATE/ZIP:	OFFICER:
VENDOR NAME:	PHONE #:
ADDRESS:	
CITY/STATE/ZIP:	ACCOUNT #:
VENDOR NAME:	PHONE #:
ADDRESS:	
CITY/STATE/ZIP:	ACCOUNT #:
VENDOR NAME:	PHONE #:
ADDRESS:	
CITY/STATE/ZIP:	
I, WE THE UNDERSIGNED, BEING THE OWNE MADE APPLICATION FOR CREDIT WITH YOU, I INDEMNIFY YOU FOR ANY AND ALL OF ITS OB BY YOU, AND I, WE DO AGREE TO WAIVE NOTI OF PAYMENT WITHOUT LIMITATIONS AND DO THE OBLIGATIONS OF ANY MERCHANDISE OR O	UTHORIZATION STATEMENT R, OR PRINCIPAL STOCKHOLDER OF THE COMPANY ABOVE WHO HAVE HEREBY AGREE FOR VALUABLE CONSIDERATION TO UNCONDITIONALLY LIGATIONS, AND TO PAY WHEN DUE, FOR ALL MERCHANDISE DELIVERED CE OF DEFAULT, HEREBY GIVING YOU THE RIGHT TO EXTEND THE TIME INDIVIDUALLY AND SEVERALLY AGREE TO BE PERSONALLY LIABLE FOR CREDIT EXTENDED BY YOU. I, WE AUTHORIZE WHOLESALE SHEET METAL ORMATION GIVEN ON THIS CREDIT APPLICATION.
AUTHORIZED SIGNATURE:	DATE:



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

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: