



Credit Application Form

Steel Plus Distribution
Phone +1 (450) 629-6363 Fax +1 (450) 629-8557
2534 East 100 South
Columbia City, IN 46725 USA

I understand that the information furnished to you on the reverse side thereof, is for the purpose of obtaining credit information from your firm. I fully understand your credit terms and agree to your shipping terms and your payment terms. I am authorized, in my capacity, to bind my firm accordingly. That all accounts or monies due shall be due and payable at your business. That all past accounts, notes, judgement or legal fees shall automatically draw interest at the rate of ten percent (10%) per annum. I here by authorize Steel Plus Distribution Inc. to conduct credit inquiring for the purpose of establishing credit and authorize all agencies and companies thus contacted to release credit information regarding our firm to Steel Plus Distribution Inc.

Name (Please print)

Signature

Title

In consideration of credit being extended to the aforementioned firm, I personally guarantee all indebtedness hereunder. I further agree that this guaranty is an absolute, completed and continuing one and no notice of the indebtedness or any extension of credit already or hereafter contracted by or extended need be given. The terms may be re-arranged, extended and/or renewed without notice to me. That I will, within ten days from date of notice that the account is past due, pay the amount due and that under circumstances explained to me.

Name (Please print)

Home Phone

Social Security No.

Home Address

City

State

Zip Code

Signature (Must be an authorized banking signer)