



CUSTOMER CREDIT APPLICATION

ACCOUNT STATUS: NEW ACCOUNT EXISTING ACCOUNT ACCOUNT #:

NATURE OF BUSINESS: _____ YEAR ESTABLISHED: _____

PARTNERSHIP PROPRIETORSHIP CORPORATION

D & B #: _____ FEDERAL ID #: _____ STATE OF INCORPORATION: _____

APPLYING FOR NET TERM AMOUNT OF CREDIT DESIRED \$ _____

APPLYING FOR COD COMPANY CHECK AMOUNT OF CREDIT DESIRED \$ _____

BILLING INFORMATION

COMPANY NAME: _____

STREET ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ TELEPHONE #: _____ FAX #: _____

EMAIL ADDRESS: _____

PERSONAL INFORMATION ON OFFICERS AND PARTNERS

FIRST NAME: _____ LAST NAME: _____

TITLE: _____ HOME PHONE: _____

SS #: _____ D.O.B: _____

HOME ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ Driver's License # _____

FIRST NAME: _____ LAST NAME: _____

TITLE: _____ HOME PHONE: _____

SS #: _____ D.O.B: _____

HOME ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ Driver's License # _____

TRADE REFERENCES

1) NAME OF SUPPLIER: _____ ACCOUNT #: _____

HOW LONG: _____ HIGH CREDIT \$ _____

ADDRESS: _____ TELEPHONE #: _____

FAX #: _____

2) NAME OF SUPPLIER: _____ ACCOUNT #: _____

HOW LONG: _____ HIGH CREDIT \$ _____

ADDRESS: _____ TELEPHONE #: _____

FAX #: _____

3) NAME OF SUPPLIER: _____ ACCOUNT #: _____

HOW LONG: _____ HIGH CREDIT \$ _____

ADDRESS: _____ TELEPHONE #: _____

FAX #: _____

BANK REFERENCE (S)

****THIS SHEET MUST BE FILLED OUT AND SIGNED & RETURNED WITH APPLICATION**

NAME OF BANK: _____ ACCOUNT #: _____ HOW LONG: _____
CONTACT PERSON: _____ ROUTING #: _____
ADDRESS: _____ TELEPHONE #: _____
FAX #: _____

NAME OF BANK: _____ ACCOUNT #: _____ HOW LONG: _____
CONTACT PERSON: _____ ROUTING #: _____
ADDRESS: _____ TELEPHONE #: _____
FAX #: _____

Dear Bank Officer:

We are authorizing the bank to release information about our accounts: outstanding, credit line and payment history to Kessler Technologies to be used explicitly for the establishment of an open account and credit line. This information is to be kept in the strictest of confidence.

Signature of Officer _____ Print Name _____

Dear Bank Officer:

The above customer is applying for a credit line with us and has given your bank as reference. Kindly provide us with the following information and send this form back to us at Fax (866) 591-4593 or email sales@kesstek.com

For any questions, please call us at (973) 810-5646.

Date Account Opened: _____ Average Balance Maintained: _____

Line of Credit (If Any): _____ Secured: _____

Credit Limit: _____ Amount Now Owing: _____

Payment Habits: _____ NSF Checks: _____

Overall Credit Rating: _____

Comments: _____

Companies requesting a credit line of \$10,000 or more must submit copies of their financial statements for the last two years. This information will be for the exclusive use of the credit department of Kessler Technologies and will remain confidential.

CREDIT CARD INFORMATION:

All customers who request an open account or C.O.D company check status must fill out this form. If Kessler Technologies ships out merchandise and does not receive payment according to the terms, we will charge your credit card account. This would be done only when all other methods of collection are exhausted.

Company Name: _____ American Express #: _____ Exp Date: _____
Cardholder Name: _____ Visa Card #: _____ Exp Date: _____
Billing Address: _____ Master Card #: _____ Exp Date: _____
_____ Zip: _____ Discover Card #: _____ Exp Date: _____
Phone # _____ Signature of Card Holder: _____

GUARANTEE: *(Sign only if applying for Net terms)*

I, _____, residing at (Home Address)

For good and valuable consideration including Kessler Technologies extending credit at my request which I

hereby acknowledge as having been received by: (Your Company Name) _____

(hereinafter referred to as the "Company"), hereby personally guarantee the payment to Kessler Technologies of any obligation and indebtedness of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the company shall fail to pay the same. It is understood that this guarantee shall be a continuing and irrevocable guarantee and indemnify for such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice hereof and to jury trial and consent to all renewals and modifications of the credit agreement hereby guaranteed. The guarantor grants permission to Kessler Technologies to obtain information from any and all sources to properly ascertain the guarantor's ability to meet its financial obligations.

GUARANTOR: _____

SIGNATURE: _____ DATE: _____

This application has been executed by an authorized agent of the customer and hereby grants permission to Kessler Technologies to obtain information from any and all sources required to properly ascertain the customer's capability to meet its financial obligations. This credit application and agreement is submitted by Customer to Kessler Technologies for all amounts due according to Kessler Technologies' invoice on or before net due date. Customer also agrees to pay interest on all amounts that are past due. Interest can be charged monthly at 1.5%. If Customer should default in any payments(s), Kessler Technologies has reserved the right to declare all invoices amounts due and payable without notice to Customer. Additionally, Customer will be responsible for all collection costs and attorney fees, whether suit is filed or not, in order to collect any delinquent amount. Customer also agrees to provide Kessler Technologies with updated credit information on request and to provide annual financial statements to Kessler Technologies on as a condition for the continued extension of credit. The undersigned certifies that all of the information contained herein is true and correct to the best of their information, knowledge and belief. For all purchases and transactions, customer agrees to adhere to credit/service policies and terms and conditions established by Kessler Technologies which may be revised from time to time.

COMPANY NAME: _____

SIGNATURE: _____ TITLE: _____

DATE: _____