

**APPLICATION FOR OPEN LINE OF CREDIT**

DATE \_\_\_\_\_ ANTICIPATED MONTHLY PURCHASES \_\_\_\_\_

FIRM NAME \_\_\_\_\_ DIVISION OF \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

PREFERRED INVOICING EMAIL ADDRESS \_\_\_\_\_

## TYPE OF BUSINESS

CORP. \_\_\_\_\_ PARTNER \_\_\_\_\_ INDIVIDUAL \_\_\_\_\_

BUSINESS INCORPORATION DATE \_\_\_\_\_ DUNN AND BRADSTREET # \_\_\_\_\_

RESALE TAX NUMBER \_\_\_\_\_

## TRADE REFERENCES:

	NAME	ADDRESS	PHONE/FAX
1.)	_____	_____	_____
2.)	_____	_____	_____
3.)	_____	_____	_____

## BANK REFERENCES:

NAME OF BANK: \_\_\_\_\_

CONTACT \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

PHONE \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

## AUTHORIZATION:

I (WE) HEREBY APPLY FOR BUSINESS CREDIT WITH METAL PARTNERS REBAR LLC, DBA: METAL PARTNERS INTERNATIONAL AND AGREE TO PAYMENT WITHIN ESTABLISHED CREDIT TERMS (NET 30 DAYS). IN CONSIDERATION OF EXTENDING CREDIT TO THE APPLICANT, I (WE) AGREE TO BE PERSONALLY, JOINTLY AND SEVERALLY RESPONSIBLE FOR THE PAYMENT OF ALL SUMS DUE AND OWING AND DO UNCONDITIONALLY AND IRREVOCABLY GUARANTY THE APPLICANT'S PAYMENTS. I (WE) UNDERSTAND THAT ALL PAST DUE AMOUNTS ARE SUBJECT TO AN ADMINISTRATIVE COLLECTION FEE OF \$50.00. I (WE) ALSO AGREE TO PAY ALL COURT COSTS AND REASONABLE ATTORNEYS FEES IF LITIGATION IS NECESSARY TO COLLECT PAST SUMS. I (WE) AGREE THAT ANY AND ALL DISPUTES BETWEEN THE PARTIES SHALL BE GOVERNED BY THE LAWS OF THE STATE OF ILLINOIS. I (WE) FURTHER AGREE THAT THE COURTS OF THE STATE OF ILLINOIS SHALL HAVE EXCLUSIVE JURISDICTION IN ANY LITIGATION BETWEEN THE PARTIES ARISING OUT OF THIS CREDIT APPLICATION AND AGREEMENT AND/OR THE SALE BY METAL PARTNERS INTERNATIONAL OF ANY GOODS OR SERVICES TO THE APPLICANT(S). I (WE) AGREE TO SUBMIT TO THE JURISDICTION OF SUCH COURTS AND THAT SUCH COURTS CONSTITUTE A CONVENIENT FORUM AND THAT PROCESS MAY BE SERVED BY CERTIFIED MAIL RETURN RECEIPT REQUEST AT THE APPLICANT'S ABOVE ADDRESS. I (WE) CERTIFY THAT ALL STATEMENTS MADE HERIN ARE TRUE AND ACCURATE TO THE BEST OF MY (OUR) KNOWLEDGE. I (WE) AUTHORIZE METAL PARTNERS INTERNATIONAL. TO MAKE ANY AND ALL INQUIRIES NECESSARY FOR ACTION ON THIS CREDIT APPLICATION AND AGREEMENT. I (WE) HEREBY INDEMNIFY METAL PARTNERS INTERNATIONAL AND ITS AGENTS, FROM ANY LIABILITY RESULTING FROM SUCH INQUIRIES.

\_\_\_\_\_  
AUTHORIZED SIGNATURE(S)\_\_\_\_\_  
(PLEASE PRINT FULL NAME)\_\_\_\_\_  
TITLE(S)\_\_\_\_\_  
DATE