

ERICH INDUSTRIES, Inc.

Confidential Credit Application

Name of business (Trade-Style)

If Corporation, as recorded by Sec. of State

Address:

Legal Entity:

Individual -DBA

Partnership

Corporation

City, State:

Zip Code:

Phone: ()

Date Established and/or Incorporated

Please check: Taxable Exempt

IF EXEMPT PLEASE SUPPLY COPY OF

Resale No.

EXEMPTION CERTIFICATE

MONTHLY CREDIT REQUIREMENTS FROM US \$

DUN & BRADSTREET RATING:

FULL NAME & HOME ADDRESS OF CORPORATE OFFICERS, OWNERS, OR PARTNERS

President:

Vice President:

Spouse's Name:

Spouse's Name:

Secretary:

Treasurer:

Spouse's Name:

Spouse's Name:

REFERENCES: (Give only names of those you purchase from on open account)

Name:

Phone: ()

Address:

City, State, Zip:

Individual to Contact:

Name:

Phone: ()

Address:

City, State, Zip:

Individual to Contact:

Name:

Phone: ()

Address:

City, State, Zip:

Individual to Contact:

Name:

Phone: ()

Address:

City, State, Zip:

Individual to Contact:

BANK REFERENCES:

Name:

Address:

City, State, Zip:

Individual to Contact:

Type of Account:

Checking: (Account #:)

Savings: (Account #:)

Commercial: (Account #:)

Loans: Installment: (Account #:)

Mortgage: (Account #:)

Name:

Address:

City, State, Zip:

Individual to Contact:

Type of Account:

Checking: (Account #:)

Savings: (Account #:)

Commercial: (Account #:)

Loans: Installment: (Account #:)

Mortgage: (Account #:)

We hereby authorize and direct all financial institutions listed above to disclose any and all information concerning our accounts (please check).

Your signature will acknowledge your reading and acceptance to both sides of this document.

Signed: (Full Legal Name of Firm)

By: (Member of Firm)

TERMS AND PAYMENTS

I. Terms.

A. All Invoices must be paid in compliance with the terms specified on the invoice.

B. For Open-Credit Terms

1. Do Not Delay Payments.
2. All Invoices must be paid within thirty (30) days of the invoice date.

C. The amount specified on the invoice must be paid in full.

1. No deductions, to the amount specified on the Invoice (other than discount, if qualified) will be permitted.
2. All Invoices must be reviewed when received (do not wait until payment is due) to insure accuracy. If an Invoice is incorrect, that information must be reported to the Credit Manager, at which time instructions on how to handle the payment for the Invoice will be given.

II. Requests for Credit, Adjustments, and Returned Goods Authorizations.

A. Requests for credit, account adjustments, and authorization to return merchandise must be made through the proper channels.

1. Regional Sales Representatives.
2. Customer Service Representatives.

B. If your request has not been handled to your satisfaction, within thirty (30) days, please notify the Credit Department (in writing) and your request will be investigated and expedited.

III. Services Charges.

A. Compliance with our terms will insure that no Service Charges (as indicated on our invoices) are generated on the account.

B. If a Service Charge is generated (1.5% per month or an annual rate of 18%) on invoices which are thirty (30) days past due, customer agrees to pay said service charges upon receipt of the Service Charge Invoice.

The above policy is designed to provide all of our customers with the best possible service, and the control features to insure its success.