The Custom Companies, Inc. Application for Credit 135 N Railroad Ave. Northlyke H 60164

Ph# (708) 338-8888 Fax# (708) 615-2018

Northlake, IL 60164 Date: _____

I/We herewith make application to The Custom Companies, Inc. (hereinafter "Custom") for credit or an increase or reconfirmation of our existing credit and account. The undersigned gives and grants Custom, or their agent, permission to verify all information stated herein at any time. I/We hereby agree that all granted credit shall be paid timely in accordance with Custom's normal terms. I/We do affirm that all information supplied is true and correct.

PLEASE ANSWER ALL QUESTIONS

Company Name		——— Partn	ership:	_ Proprietorship:	Corporation:			
If Corporation, State & Yea	ar Incorporated:	Date Established:						
Federal ID#	Туро	e of Business _						
Phone#:	Fax#:	#:e-mail:						
Street Address:								
City:	State:	Zip:	How long at this address:					
Mailing Address:								
City:	State:	Zip:	Ho	w long at this add	lress:			
Does Company Own Real I	Property: NoY	les Ad	dress:					
Do you pledge, factor or bo	errow accounts receiva	ble: No:Y	Yes	From Whom:				
Special Billing Instructions	:							
Amount of Credit Requeste	Cycle:							
	LIST ALL BANK	ACCOUNTS A	ND INF	<u>ORMATION</u>				
Name:	Acct#:		City: _		State:			
Type of Account:	Contact:							
Name:	Acct#:		City: _		State:			
Type of Account:	Contac	et:	Phone:					
Signature to authorize relea	se of banking info: X_			Title: _				

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LIST ALL PRINCIPALS OF COMPANY WITH THEIR TITLES

Name:	Title:			SS#:					
Home Address:	City:		_ State:	Zip	Own:	Rent:			
Name:	Title:		SS#:						
Home Address:	City:		_ State:	Zip	Own:	Rent:			
Name:	Title:		SS#:						
Home Address:	City:		_ State:	Zip	Own:	Rent:			
	COMPANY S	SUPPLIERS / RE	FERENCES	<u>S</u>					
Name:	City:	State:	Ph#:		Contact:				
Name:	City:	State:	Ph#:		Contact:				
Name:	City:	State: _	Ph#:		Contact:				
contained within the tariffs general information to Cus of the above named entity. any and all invoices therea		m Invoice. I/We er declare that I any invoices, th	further authave the a dis agreement	thorize my/ uthority to ent will ren	our bank to relea apply for credit on ain in effect and	se on behalf will apply to			
Name of Business:		Date:							
Signature: X		Print Name & Title:							
	PERSO	NAL GUARAI	<u>NTEE</u>						
in the future for all monies application and who have	act as a personal guarantor and sowned by the Company, Orgbeen extended credit both now be revoked or rescinded if any gation or recovery rights.	anization, Perso and in the futu	ns, or Cor re. Guaran	porations w tor recogni	ho have signed t zes, understands	his credit and agrees			
Guarantor: X	must be Owner, Partner, or Of	_Guarantor: X _							
Signature: Witness/Agent	of The Custom Companies, In	ic: X			Date:				

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