

<b>Customer Information</b>	
Business Name	Phone Number with Area Code
Address	Type of Business
	D&B Rating Number
Billing Address if Different	
Date Business Started	Business Structure (Circle One) Corporation   Partnership   Proprietorship   Municipal   Non-Profit

<b>Principal(s) Information</b>			
Owner Name		Owner Name	
Social Security Number	Title	Social Security Number	Title
Home Address		Home Address	
Phone Number with Area Code		Phone Number with Area Code	

<b>Bank References</b>			
Bank Name		Bank Name	
Branch Address		Branch Address	
Name of Officer/Contact	Phone Number	Name of Officer/Contact	Phone Number
Checking Account Number	Date Account Opened	Checking Account Number	Date Account Opened

<b>Trade References</b>			
Company Name	Address (Include Zip Code)	Telephone	Account Number

Person(s) Authorized to place orders with us:		Monthly Credit Desired	
Are Purchase Orders Required?		Send Invoices to	
Credit Card	Name on Card	Account Number (Include PIN # located on back of card)	Expiration Date

<b>Authorization</b>	
<p>I/We hereby agree to all of the terms for payment as set forth on all invoices or bills for payment issued by Allfax to us in connection with any and all sales of goods or services we request or order. I/We hereby agree that in the event payment is not made timely, interest shall be due from the due date until paid at the rate of 1 1/2% per month. All NSF checks, returned, stop payment or other check defaults, shall result in a 100% default charge, plus interest. I hereby authorize Allfax to charge the credit card account described above for any delinquent balance.</p> <p>It is agreed that in the event Allfax makes any claim for payment against us for any amount due, Allfax shall be entitled to reasonable attorney's fees, and all expenses, associated the cost of collection against us. Both parties hereby stipulate that Louisiana Law shall apply in the event of any dispute between the parties. Both parties agree to exclusive jurisdiction and venue for the filing of any lawsuit in the Parish of St. Charles, State of Louisiana.</p>	
Signature: _____	Print Name: _____ Date: _____
Company: _____	Title: _____
<b>Personal Guarantee</b>	
<p>I/We have read, understand and agree to all of the terms and provisions contained in the Credit Application above. I/We hereby agree to guaranty payment of any and all amounts which become due, delinquent or which otherwise remain unpaid, including any interest, attorney's fees, costs, expenses, court costs, or check charges. This guaranty shall be continuing in nature and shall not terminate until any outstanding balance due to Allfax is paid in full.</p>	
Guarantor: _____	Date: _____