

AGREEMENT FOR SERVICES & CREDIT

CUSTOMER IDENTIFICATION									
CUSTOMER NAME:									
CORPORATION		PARTNERSHIP		SOLE PROPRIETORSHIP		LIMITED LIABILITY Co		STATE OF ORIGIN	
STREET ADDRESS:				CITY:			STATE:		
COUNTRY OF ORIGIN:			ZIP:		TELEPHONE:			FAX:	
TYPE OF BUSINESS:						NO. OF YEARS IN BUSINESS:			
NAME OF PREDECESSOR BUSINESSES:									
PERSON TO CONTACT REGARDING INVOICES:						PHONE:			
FEDERAL TAX ID#:			SALES TAX EXEMPT #:			(PLEASE ATTACH COPY OF FORM)			
PARENT COMPANY:									
CITY:			STATE:		COUNTRY:				
ZIP:		TELEPHONE:			FAX:				
INFORMATION ON PRINCIPALS									
FOR PROPRIETORSHIP OR PARTNERSHIP: LIST ALL OWNERS AND/OR PARTNERS.									
FOR CORPORATION OR LIMITED LIABILITY COMPANY: LIST ALL OFFICERS, DIRECTORS, MEMBERS AND MAJORITY STOCKHOLDERS.									
NAME:					POSITION:				
HAVE ANY OF THE COMPANIES OR INDIVIDUALS LISTED ABOVE EVER BEEN A DEBTOR IN A BANKRUPTCY PROCEEDING?									
HAS ANY JUDGMENT EVER BEEN ENTERED AGAINST ANY OF THE COMPANIES OR INDIVIDUALS LISTED ABOVE?									
ARE THERE LEGAL ACTIONS OR ARBITRATIONS PENDING AGAINST ANY OF THE COMPANIES OR INDIVIDUALS LISTED ABOVE?									