

SULLIVAN-PALATEK, INC.

**1201 W. US Hwy. 20
MICHIGAN CITY, IN 46360
PHONE: 219-874-2497
FAX: 219-809-0203**

CREDIT APPLICATION

Line of credit requested \$ _____ Account Type Requested Portable____, Industrial _____, Both_____

Business Name _____ Phone _____

Fax _____ Accounts Payable Contact _____

Accounts Payable E-mail address _____

Address _____ For past _____ years.
(Street) (City) (State) (Zip)

Shipping address _____

D/B/A _____ Federal tax I.D. # _____

Tax Exemption Number _____ **Form ST105 Required if Shipping to Indiana.**

Type of business _____ Date established _____ How long in business _____

Does state, county or city require a license? Yes _____ No _____ License # _____

OWNERSHIP: _____ Sole ownership _____ Partnership _____ Corporation

PRINCIPAL: _____
(Name) (Title) (SS#) (Home address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home address)

TRADE REFERENCES: (Name suppliers of major products and services)
NAME FAX NUMBER EMAIL ADDRESS

BANK REFERENCE: _____ Checking _____ Savings _____ Loan

Name Address Account # Contact/Phone Number

No. of employees _____ Estimated annual sales \$ _____ Sales area _____

Has the firm or any of its Principals ever been bankrupt? ____ Yes ____ No

If yes, please explain: _____

Mortgage holder/Landlord _____

Address/Phone _____

OTHER BUSINESS DEBTS:

Name	Address	Account #
_____	_____	_____
_____	_____	_____

TYPE OF CREDIT AGREEMENT: _____

Applicant agrees to pay any collection costs incurred to collect the unpaid balance, including interest on the unpaid balance as allowed by state law and any reasonable attorney's fees incurred.

The undersigned, as an inducement to grant credit, warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed above.

Name	Title	Date
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Name	Title	Date
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PERSONAL GUARANTEE

In consideration of credit being extended by SULLIVAN-PALATEK, INC. to the above named applicant for merchandise to be purchased whether applicant be an individual or individuals, a proprietorship, a partnership, a corporation or other entity, the undersigned guarantor or guarantors each hereby contract and guarantee to SULLIVAN-PALATEK, INC., the faithful payment, when due, of all accounts of said applicant for purchases made within five years next after the date of this application. The undersigned guarantor or guarantors each hereby expressly waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment and demand for payment on applicant, protest and notice to SULLIVAN-PALATEK, INC., extension of time of payment to applicant, acceptance of partial payment or partial compromise, all other notices to which the undersigned guarantor or guarantors might otherwise be entitled and demand for payment under this guarantee. Any revocation of this guarantee shall be in writing and delivered to SULLIVAN-PALATEK, INC.

1201 W US Hwy. 20, Michigan City, IN 46360.

Name	Title	Date
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Name	Title	Date
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