

**Aggregate Logistics**

PO Box 393  
Timnath, CO 80547  
(720) 421-8222  
(970) 282-4483

**Credit Application**

Firm Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Anticipated Volume of Business Per Month: \_\_\_\_\_  
Would you like invoices/statements emailed to you? YES \_\_\_ NO \_\_\_ Email address: \_\_\_\_\_

**OWNERS OR COMPANY OFFICERS**

NAME: \_\_\_\_\_ Title: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
NAME: \_\_\_\_\_ Title: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**ORGANIZATION**

\_\_\_ Corporation    \_\_\_ Partnership    \_\_\_ Proprietorship    \_\_\_ Other  
Years in Business: \_\_\_\_\_ Accounts Payable Contact: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Purchase Order Required: \_\_\_ YES \_\_\_ NO  
Do you have, or have you had, any judgments, garnishments, or bankruptcies? \_\_\_ YES \_\_\_ NO  
If yes, please explain: \_\_\_\_\_

**REFERENCES (NOTE: FAX Numbers are REQUIRED)**

Bank Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_ (Required)  
Checking Acct #: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Service/Product: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_ (Required)  
Acct #: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Service/Product: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_ (Required)  
Acct #: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Service/Product: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_ (Required)  
Acct #: \_\_\_\_\_

FOR INTERNAL USE ONLY:  
SALES REP \_\_\_\_\_ PRICE LEVEL \_\_\_\_\_ TAX EXEMPT?  YES  NO TAX # \_\_\_\_\_

## AGREEMENT

Credit purchaser authorized Aggregate Logistics to obtain credit information from the above references. If your account is approved then you will be extend the Payment Terms listed below.

**PAYMENT TERMS:** Payment for all goods and services purchased by or for your account is due and payable 30 days from the date goods are delivered and/or services are provided, after which your account will be become delinquent. A late payment charge of 1.5% per month compounded (18% per annum) will be added to all delinquent portions of your account. You also agree to pay all costs and reasonable attorneys' fees incurred by us to collect monies due us if we are required to place your account in the hands of an attorney or collection agency for collections or if it is collected through bankruptcy or other judicial proceedings.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

## PERSONAL GUARANTY

For valuable consideration, and to induce you to extend credit hereon, the undersigned jointly and severally hereby guarantee, unconditionally, the payment, when due, of each and every obligation, now existing or hereafter arising, owing to Aggregate Logistics by the firm named below and shown as the account guaranteed.

This guaranty is a continuing guaranty, and shall remain in force until revoked by notice in writing to Aggregate Logistics, and revocation hereof shall not prejudice Aggregate Logistics' claim hereunder with respect to any obligation arising prior to revocation.

This guaranty shall extend to and cover any extension or renewal of our obligation and Aggregate Logistics does, without prejudice, reserve the rights to any claim against the undersigned, and, at any time, may extend or change the time of payment.

The undersigned further agree that the venue for any suit hereunder shall be in Fort Collins, Colorado, and the undersigned further agree to save harmless and indemnify Aggregate Logistics against any loss, claim or demand arising by the failure of the account named below to pay its indebtedness to Aggregate Logistics, either present or future, as well as any expense, cost and reasonable attorneys' fees incurred by Aggregate Logistics in the collection of any sums due and owing or arising under this indemnity agreement.

Furthermore, if the undersigned's payment is remitted by check and is subsequently returned to Aggregate Logistics as non-redeemable, the undersigned agrees to pay a \$20.00 reprocessing charge to Aggregate Logistics, plus any applicable bank charges.

Account Guaranteed:

\_\_\_\_\_  
Name of Corporation, Firm or Organization

\_\_\_\_\_  
Signature (Officer, Partner or Owner)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Officer, Partner or Owner)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date