

CREDIT APPLICATION

Date _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax Number: _____

Tax ID #: _____ DUNS #: _____

Business Type

Sole Proprietorship Partnership Corporation State of Incorporation: _____

Ownership

Name (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Direct Phone: _____

Purchase orders and invoice payment contact(s)

1. Name: _____

Direct Phone: _____ Email: _____

2. Name: _____

Direct Phone: _____ Email: _____

Trade Reference (Major suppliers of products and services)

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Direct Phone: _____ Email: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Direct Phone: _____ Email: _____

Authorization

The above information is herewith submitted for the purpose of opening an account and I do hereby certify this information to be true. You are authorized to investigate the references listed. Upon default of terms and conditions, applicant agrees to pay any collection cost incurred, including reasonable attorney fees. Personal Guaranty: In consideration of credit being extended by Superior Carbide LLC for merchandise to be purchased, the undersigned contracts and guarantees to Superior Carbide LLC the faithful payment, when due, of all accounts for purchases made after the date of this application. The undersigned guarantor hereby expressly waives all notice of acceptance of this guaranty, notice of extension of credit to applicant, presentment, and demand for payment on applicant, protest and notice to undersigned guarantor of dishonor or default by applicant or with respect to any security held by Superior Carbide LLC, extension of time of payment to applicant, acceptance of partial payment or partial compromise, all other notices to which the undersigned guarantor might be otherwise entitled and demand for payment under this guarantee. Any revocation of this guarantee shall be in writing to Superior Carbide LLC.

Signature _____ Title _____

Print Name _____ Date _____

Email to: jeff@superiorcarbide.com OR Call: 262-342-6333 with any questions.