



Credit Application

Name: _____ Phone No: _____

Bill to address: _____

Ship to address: _____

Fax No: _____ Accounts Payable email: _____

Corporation: _____ Tax ID#: _____ ***If resale, please request blank form***

Partnership: _____ Sole Prop: _____ Social Security #: _____

Owners/Officers: _____

References

Bank: _____ Phone: _____

Name: _____ Phone: _____ Fax: _____

Name: _____ Phone: _____ Fax: _____

Name: _____ Phone: _____ Fax: _____

AGREEMENT

All documents must be signed by an officer of your company. The Customer certifies that the information contained herein is true and correct, and further agrees that the Credit Application is submitted to Ferrosaur, Inc., Customer grants permission to Ferrosaur, Inc. to obtain independent credit reports and other information from Customer's trade references and banks, and authorizes credit references and banks to release information that may be used to determine creditworthiness, both now and in the future. Customer agrees that if credit is extended, all credit and sales made shall be subject to the following:

TERMS AND CONDITIONS

1. Customer shall pay the full amount of the invoice(s) when due, which is defined to be thirty (30) days from the invoice date, unless an alternate time frame, has been agreed to by both Ferrosaur, Inc. and customer in writing.
2. If payment in full is not received by the due date, Customer shall owe, in addition to the invoice amount, a late fee of 1.5% per month, or the maximum allowed by law, on all unpaid balances. In the event Ferrosaur, Inc. refers any unpaid past due balance to an outside collection agency and/or attorney for collection, Customer agrees to pay Ferrosaur, Inc. reasonable attorney's fees and all other costs of collection. I/We further agree that jurisdiction, law and venue for any litigation to enforce this guarantee by Ferrosaur, Inc. or any dispute between parties hereto, shall properly be in a court located in the county or district where the Ferrosaur, Inc. facility is located and from where the transaction originated.
3. I further certify on Customer's behalf that Customer is solvent as defined by Article 1 of the Uniform Commercial Code, and that Customer will immediately, in writing, notify Ferrosaur, Inc. if it becomes insolvent.
4. This agreement shall be continuing unless mutually terminated by both parties in writing.
5. I further certify that I am an officer of Customer, knowledgeable of the financial conditions of Customer, and that I am empowered and authorized to enter into the aforesaid agreement on Customer's behalf.

Signature: _____ Date: _____

Print Name: _____ Title: _____