

Application for Credit with R.K. Stratman, Inc.

NAME OF FIRM OR INDIVIDUAL

ACCOUNT#

DEALER#

ADDRESS

CITY

STATE

ZIP

PHONE

FAX

EMAIL

Hereby applies for credit in accordance with the terms and conditions of:

RK Stratman Inc.

phone: 636-332-5636

680 B. Parr Road

Wentzville, MO 63385

Attention: Credit Manager

email: ardept@rkstratman.com

fax: 636-332-5222

Credit Terms: Open Account 30 days

1.5% interest charged on past due accounts. 18% annual rate

The following information must be provided. It will be held in the strictest confidence.

OWNERSHIP INFORMATION

Corporation

Check here if incorporated in the last six months

Partnership

Individual

1

Name(s) of Principal(s)

Complete Home Address

Zip

Cell Phone

2

Name(s) of Principal(s)

Complete Home Address

Zip

Cell Phone

3

ACCOUNTS PAYABLE CONTACT

Accounts Payable Person

Fax

Phone

Email Address

FINANCE INFORMATION

Bank

Bank Address

Bank Officer or Department

Phone

OPEN ACCOUNT REFERENCES

1

Business Name

Complete Address and Zip

Phone

2

Business Name

Complete Address and Zip

Phone

3

Business Name

Complete Address and Zip

Phone

Check here if cash sales are okay until credit is approved.

The undersigned hereby unconditionally guarantees, as direct obligor and not merely as surety, the punctual payment when due of all obligations of the company to you now hereafter existing together with the interest thereon and all costs or expenses arising out of any default by the company of its obligation to you and any and all expenses (including reasonable attorney's fee) incurred by you in enforcing your rights under this guaranty. If the company defaults in the payment of any obligation, the undersigned shall forthwith pay to you the full amount due and payable with interest thereon until said debt is paid in full.

Signed: _____

Date: _____ Title: _____

PLEASE DO NOT WRITE IN THE SPACE BELOW

VERIFICATION

Credit Approved By: _____

Credit Refused By: _____

Date: _____