

Credit Agreement

Please fax signed application to: **614.873.2220** and mail original to: **8225 Estates Parkway, Plain City, OH 43064**



Company Name			DBA Name (if any)		
Business Address			Phone		Fax	
Billing Address			Phone		Fax	
Type of Business			Date Busine	ss Established	No. of Employees	
E-mail address (to I	be u	sed for invoicing)	ı			
If Partnership Or S	olo	Dronriotorohin				
Please Complete						
	1.	Owner/Partner Name		SS1	 N#	
	-	Home Address		Home	Phone	
	2					
		Owner/Partner Name		188	N#	
	-	Home Address		Home	Phone	
If Corporation Please Complete	1					
r lease Complete	1.	Corporate Officer Name		Title	SSN#	
		Home Address		Home Ph		
	_			. 100 1 1		
	2.	Corporate Officer Name		Title	SSN#	
		Home Address		Home Ph	none	
	3.					
	Э.	Corporate Officer Name		Title	SSN#	
		Home Address		Home Ph	none	
	4.					
		Resident Agent Name		SSN	#	
		Home Address		Home Pr	none	
Authorizod Descrip						

Authorized Purchasers

	Names
1.	
2.	

	l Name	Addres	9	Contact Person	Phone	Fax
4	Hamo	7100100	<u> </u>	Contact Forcon	1 110110	1 4
1.						
2.						
3.						
Ban	k References			·		
	Bank Name	Branch	Address	Account No.	Phone	Fax
1.						
2.						
3.						
J.						
Am \$	ount of Credit Requested		Dunn & Brad	dstreet No.	Fede	ral Tax ID
	you Sales Tax Exempt?		Have you ey	ver filed Bankruptcy?		
<i>,</i> (1)	you daids Tax Exempt:		Tiave you ex	rer med Bankruptey:		
. lı	MS AND CONDITIONS: nvoices are due 30 days from our street in full			and if not paid are consic	lered past due.	
. II	nvoices are due 30 days from only only on the first of th	on the due d nth will be ad ient funds of	date indicated a dded to all amo r any other rea	ounts billed if not paid by	the end of the c	sed upon applicant. Any charges still
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. III . A . A . A . A . A . A . A . A .	Il bills become payable in full finance charge of 2% per more all checks returned for insufficient utstanding after 60 days from torney's fees, and court costs dotification of errors must be in approval. Customer bears liabilitied privileges may be withdread the properties of the ereby fully and unconditionall costs and attorney's fees. In pplicant agrees to indemnify a rother entity, arising out of the conditions contained herein tall and no contrary, additional, or one. In writing. The present that the above informativestigation as deemed fit, including the conditions and deemed fit, including the setting of the conditions and deemed fit, including the setting of the conditions and deemed fit, including the setting of the conditions and deemed fit, including the setting of the setting o	on the due of inth will be action the date of inthe date within 1 dity for return awn at any the credit custory guarantee and hold hare use of any ke precedent different production is true and ing contacting edit reporting	date indicated and ded to all amore any other reanyother reanyoice are subne by the application of the appli	son shall be subject to a ject to collection, and all cant. arges are considered acc se lost or damaged in travalidating the terms of the pration, then those signify indebtedness incurred at the conditions contained to applicant by MDS are conditions contained to binding upon MDSolutive tend credit to the applicant to the applicant to references and banks are close to any and all inform	the end of the cost of the cos	sed upon applicant. Any charges still bitration expenses, reasonable ins must have MDSolutions' prior on, whether signing as an officer or no MDSolutions Inc. including all collection person, association, firm, corporation or purchase order or other document, specifically accepted by MDSolutions of I authorize to make such credit the reports. My company and I authorize the financial and credit history of my

Title :

Date: