Credit Application

THE TOTAL PACKAGE Trade Name of Firm			To Be Completed by Salesperson: Date / / Salesperson #		
Legal Name			Total Amount of Sale	\$	
City Invoice-to address, if different Phone	State	Zip			
Subsidiary and/or Division of			Year Established		
Type of Business: Corporation Kind Of Business	Partnership	Sole proprietor		rmbol Code	
Names of Principal Owners:					
Name of Person in Charge of A/P:			Phone		
Are you exempt from sales tax? Are you rated by Dun & Bradstreet? Will you provide a recent financial s Name of Bank	tatement to our	No If yes, DUNS : Controller?			
Name of Bank Address			Branch		
City Phone Fax			Title		
BUSINESS REFERENCES (With wh	iom you do same d	ollar or greater volume	as credit line requested):		
NameAddress City, State, Zip Contact Phone Fax					
CUSTOMER'S AGREEMENT (Please kee	p a copy for your re	cords)	I acknowledge and understa	and the following:	
 Your terms are net 30 days from date of shipment. If credit is extended, the above organization will be r and the recovery of reasonable collection and attorr My signature below authorizes all parties stated abo 	ney fees (not to exceed 4	40%) in the event that an acc	ount is turned over for collection.		
Print Name	Sign	ature	Title	Title	

Colad

The Colad Group, LLC. • 801 Exchange Street • Buffalo, New York 14210 • Phone: 716-961-1776 / 800-950-1755 • Fax: 716-961-1753

COMMERCIAL ACCOUNTS PAYABLE CONTRACT

The information provided on this application is for the purpose of obtaining credit and is warranted by customer to be true. Applicant hereby authorizes The Colad Group, LLC ("Colad") to investigate and obtain credit and financial information concerning the Applicant at any time and from any source. All credit references (i.e. suppliers, banks, etc.) are hereby given permission to supply Colad with any information that Colad requests, not only at this time, but from time to time as Colad deems appropriate. A service charge of 1.5% per month (18% per year) will be charged against any commercial account more than thirty (30) days past due. Our standard payment terms are Net 30 days from date of invoice. If legal action is taken to enforce or intercept the terms hereof, or otherwise to obtain payment from customer, customer agrees to pay attorney's fees not to exceed twenty-five (25) percent of balance owed as well as court costs and any other collection expenses incurred. Customer hereby waives trial by jury and the right thereto in any action or proceeding arising out of, under or by reason of this Agreement or any assignment or transaction

thereunder. Customer's contractual relationship with Colad constitutes an agreement made in Maryland and is governed by the laws of Maryland. At the election of Colad, any action arising from such agreement may be litigated in Maryland, and Customer, by issuance of an oral or written purchase order or job authorization, consents to the jurisdiction of any local, state or federal court located in Maryland. Customer recognizes that any credit extended may be reduced or terminated at any time by Colad, and said actions are solely within the discretion of Colad. This Agreement does not guarantee or entitle customer to any initial or continued extension of credit. Customer represents and warrants that any credit extended is being extended in connection with a commercial transaction only, and not in connection with any non-business, personal, family, or household purposes. Claims for defects, damages, theft, or shortages from any cause must be made by the customer in writing within ten (10) days after goods are delivered. Failure to make any such claim within the stated period shall constitute irrevocable acceptance and an admission

that the goods delivered fully comply with all applicable terms, conditions and specifications. Under no circumstances shall customer be entitled to damages in excess of the replacement cost for any goods for which a claim is made, or to special or consequential damages, including profits (or profits lost).

Furthermore, Applicant hereby authorizes and empowers any attorney of any Court of Record within the United States to appear for the Applicant in any Court in one or more proceedings, or before any Clerk thereof, and to confess judgment against the Applicant, without prior notice or opportunity for a prior hearing, in favor of Colad or its assigns or successors in interest, for any sums owed to Colad, plus accrued interest, costs of suit and attorneys fees as stated herein. Applicant hereby waives all rights to stay of execution on said judgment, as well as any demand of presentment for payment, notice of dishonor, protest, notice and trial by jury. Applicant grants a security interest in the work and goods on which Colad performs services, and proceeds of such work or goods, and in any account and proceeds generated in connection with Colad's work or goods for Applicant. Applicant grants Colad authorization to file a financing statement to evidence such security interest.

Has your company, or any of its owners, partners, or officers ever filed a voluntary petition in Bankruptcy, been adjudged bankrupt, or made an assignment for the benefit of creditors? ____ YES ____ NO

Has a tax lien been filed against your company or any of its owners, partners, or officers within the past five (5) years? _____ YES _____NO

Are you involved in any legal suits relative to your credit and/or payment practices? _____ YES _____ NO

If yes for any of the above, please explain: _____

THIS APPLICATION MUST BE SIGNED BY AN OFFICER, PARTNER OR OWNER:

Your signature acknowledges your review and acceptance of this contract, that these contracts govern all current and future commercial transactions with Colad, and that the terms and conditions set forth above shall continue until cancelled in writing by Colad or by Applicant. Both parties agree to provide at least 90 days written notice of cancellation before said cancellation becomes effective.

Signature

SO THAT WE MAY CONSIDER YOUR APPLICATION FOR CREDIT, PLEASE COMPLETE BOTH PAGES OF THIS FORM, SIGN, & PROMPTLY RETURN ALONG WITH A TAX CERTIFICATE, IF APPLICABLE. EMAIL TO: cnathan@colad.com or FAX TO: 716-961-1777, ATTN: Cathy Nathan