

Straightline HDD, Inc.
 1816 E. Wasp Rd.
 Hutchinson, KS 67501
 620-802-0200



Credit Application

Fax Completed Application to: 620-802-0250
 or email to: ar@straightlinehdd.com

APPLICANT (Complete name of legal entity. If a corporation, use EXACT registered corporate name.)

| | | | | | |
|----------------------------|---|--------------------|-----------------------|-------|-----|
| Company | | | | DBA | |
| Billing Address | | City | County | State | Zip |
| Contact Person | <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. | Title | E-Mail | | |
| Telephone | Fax | # of Employees | # of Years at Address | | |
| Amount of Credit Requested | FEIN # | Date Company Began | Annual Sales | | |

Has the company or it's principals ever taken bankruptcy: Yes No If yes, explain:

| | |
|---------------------|---|
| Nature of Business: | Type of Business |
| | <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation |

PERSONAL INFORMATION ON OFFICERS, PARTNERS, OR GUARANTOR

| | | | |
|--------------|-------|-------------|-------------------|
| Name | Title | % Ownership | Social Security # |
| Home Address | City | State | Zip |
| | | | Home Phone # |
| Name | Title | % Ownership | Social Security # |
| Home Address | City | State | Zip |
| | | | Home Phone # |

TRADE REFERENCES – TWO YEAR HISTORY

| | | | |
|------------------|-----------------|--------------|----------------|
| Name of Supplier | City/State | Telephone #. | Contact Person |
| | | Fax # | |
| Email | Type of Account | | |
| Name of Supplier | City/State | Telephone #. | Contact Person |
| | | Fax # | |
| Email | Type of Account | | |
| Name of Supplier | City/State | Telephone #. | Contact Person |
| | | Fax # | |
| Email | Type of Account | | |

COMPANY BANK REFERENCES – TWO YEAR HISTORY

| | | | |
|---------------------|---------------|-------------|-----------------|
| Name of Bank/Branch | Chkg. Acct. # | Telephone # | Contact Officer |
| City/State | Other Acct. # | Fax # | |
| Name of Bank/Branch | Chkg. Acct. # | Telephone # | Contact Officer |
| City/State | Other Acct. # | Fax # | |

Applicant(s) authorizes the release of any credit information concerning applicant including credit reports, loan, lease, checking, saving & trade accounts to StraightLine HDD, Inc., and / or any of its assigns. Applicant(s) warrants that the information stated above is true & correct. Authorization is granted to use photo or fax copies of this application and applicant's signature thereon to obtain credit information.

Applicant(s) agrees to pay any collection costs incurred to collect any unpaid balances, including interest on the unpaid balance as allowed by law and additionally any reasonable attorney's fees or collection costs incurred.

X

 Signature Date

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Personal Guarantee

Date _____ 20 ____

I, _____, residing at _____
for and in consideration of your extending credit at my request to

_____ (hereinafter referred
(Name of Company)

to as the "Company"), of which I am, _____, hereby
(Title)

unconditionally guarantee to StraightLine HDD, Inc. full and prompt (Net 30 days) payment at 1816 E. Wasp Rd., Hutchinson in the State of Kansas of any obligation of the Company. I agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guarantee shall be a continuing and irrevocable guaranty and indemnify for such indebtedness of the Company. I waive notice of default or non-payment and consent to any modification or renewal of the credit agreement hereby guaranteed. I agree to pay all costs of collection including reasonable attorney's fees, court costs and other expenses. I waive any and all exceptions from process and execution under the laws of the United States and any state or territory thereof. I give authorization to request/obtain a copy of any credit bureau or consumer report at any time for use in establishing and maintaining credit for the Company.

Signature _____

Printed Name: _____

Witness: _____

Printed Name: _____

Address: _____