

CREDIT APPLICATION AND GUARANTEE AGREEMENT

FIRM NAME _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

BILLING ADDRESS _____ CITY _____ STATE _____ ZIP _____

NATURE OF BUSINESS _____ LICENSE # _____

PHONE # _____ DATE BUSINESS ESTABLISHED _____ RESALE PERMIT # _____

TYPE OF BUSINESS: PARTNERSHIP SOLE PROPRIETOR CORPORATION

THE OWNERS OR STOCKHOLDERS ARE:

NAME(S) TITLE RESIDENCE ADDRESS CITY & STATE PHONE

BANKS OR SAVINGS & LOAN ASSOCIATIONS:

NAME BRANCH ADDRESS ACCOUNT NO. TYPE OF ACCOUNT

WE HAVE OPEN CREDIT ACCOMMODATIONS WITH:

FIRM NAME ADDRESS CITY PHONE

PRINCIPAL'S SOCIAL SECURITY NO. _____ DRIVER'S LICENSE _____

HAS A TAX LIEN OR CIVIL SUIT BEEN FILED AGAINST APPLICANT OR ANY OF ITS OWNERS, PRINCIPALS, OFFICERS, OR DIRECTORS WITHIN THE PAST SIX YEARS ? _____

HAS APPLICANT OR ANY OF ITS OWNERS, PRINCIPALS, PARTNERS, OFFICERS, OR DIRECTORS EVER FILED A VOLUNTARY PETITION IN BANKRUPTCY, BEEN ADJUDGED BANKRUPT, OR MADE AN ASSIGNMENT FOR THE BENEFIT OF CREDITORS ? _____

THIS CREDIT APPLICATION IS GIVEN TO SECURE OPEN ACCOUNT CREDIT. THE INFORMATION CONTAINED HEREIN IS CORRECT, COMPLETE AND TRUE.

In consideration for the extension of credit by MENORAH WHOLESALE INC., the undersigned hereby agrees to personally guarantee payment of any indebtedness owing to MENORAH WHOLESALE INC.. Should legal action be required to collect said indebtedness and to enforce this personal guarantee, then the undersigned further agrees to pay reasonable attorney fees.

Applicant and the undersigned, jointly and severally, acknowledge that A SERVICE CHARGE COMPUTED ON THE BASIS OF ONE AND ONE-HALF PERCENT (1 ½ %) PER MONTH OF ALL SUMS DUE TO MENORAH WHOLESALE INC. WHICH HAVE NOT BEEN PAID WITHIN THIRTY DAYS (30) FROM THE DATE SHALL BE CHARGED TO APPLICANT.

NAME OF APPLICANT (COMPANY NAME)

SIGNED BY TITLE

DATE