CREDIT AND GUARANTY AGREEMENT

WYLIE MANUFACTURING COMPANY

702 E. 40th Street Lubbock, Texas

Customer Name:					
Customer Address:					
Customer Phone No.:	Customer E-Mail:				
Please Check on of the Following:	The Customer is a Sole Proprietorship, Partnership, Corporation, Limited Liability Company, or a Limited Partnership.				
CUSTOMER HEREBY AGREES MANUFACTURING COMPANY (THAT ALL PURCHASES MADE FROM WYLIE & SON, INC. D/B/A WYLIE "Wylie") ARE SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:				
undersigned or his/ Customer agrees to furnished monthly 3. All purchases are d not paid according percentage rate of delinquent account has become ten (16) 4. No provision of the maximum amount permitted by law sh of the principal, sure the function of the principal and conference of the principal and conference of the principal and customers of the principal and cu	is agreement shall require the payment or permit the collection of interest in excess of the permitted by applicable law. Any payment of interest in excess of the maximum amount all ipso facto be considered as a mistake, and if the excess interest exceeds the unpaid balance che excess shall be refunded to Customer. Customer's payments first to any unpaid finance charges and then to the unpaid principal. To way binds Wylie to make credit sales to Customer, and the Customer's right to purchase reminated at any time at the sole discretion of Wylie. Wylie reserves the right, at any time and a account past due, in its sole discretion, to require that all further sales be made on a C.O.D. action is instituted to enforce payment, the delinquent Customer shall be responsible for all including, but not limited to, reasonable attorney's fees and court costs. Customer further its of Lubbock, Lubbock County Texas, shall have jurisdiction over any dispute arising out and that venue shall be proper there. Wylie may amend this agreement upon written notice to Customer of not less than thirty(30) reginning of the billing cycle within which the amendment is to become effective. It wision of this agreement is found to be invalid or is incapable of being enforced by any rule licy, all other clauses and provisions shall, nevertheless, remain in full force and effect. The ment is the product of negotiations, at arms length, of skilled business professionals. The provisions of this agreement shall be interpreted and construed in accordance with stomary meanings and Customer hereby waives the application in connection with the construction of this agreement of any rule of law to the effect that ambiguous or conflicting contained in this agreement shall be interpreted or construed against the party who prepared				
•	SIGN THIS AGREEMENT BEFORE YOU READ IT OR IF IT CONTAINS BLANK				
SPACES. YOU ARE ENTITLED TO	A COPY OF THIS AGREEMENT TO PROTECT YOUR LEGAL RIGHTS.				
Date:	Signature of Customer (or officer of Customer)				
	Printed Name and Title				
to perform or pay when due, charges in Wylie Manufacturing and the Customer	GUARANTY OF PAYMENT Dany to approve the previous Credit Agreement and in consideration of it so doing, we the erally and personally guarantee the above Customer's full payment and performance of said ify Wylie Manufacturing Company against any and all damage, loss, expense (including do by Wylie Manufacturing Company by reason of, or related to the above Customer's failure in accordance with the above agreement. The above agreement may be modified by without notice to the undersigned and without affecting this indemnity and guarantee. Wylie ment against the undersigned or any of them, jointly or severally, whether or not any action Dated:				
Guarantor's Signature: Printed Name: Social Security Number:	Guarantor's Signature: Printed Name: Social Security Number:				

AUTHORIZATION TO OBTAIN CREDIT INFORMATION

	L CREDIT REPORTING AGENCIES, EMPLOYERS, CREDITORS AND DEPOSITORIES OF THE RSIGNED:						
RE:							
	Entity Name						
	Federal Tax Identification Number						
	Street Address, City, State and Zip Code						
	Full Name of Individual (and Title, if applicable)						
	Social Security Number						
	Street Address, City, State and Zip Code						
Compa Son, In	be advised that the undersigned has made an application to Wylie & Son, Inc. d/b/a Wylie Manufacturing ny for the extension of credit. Therefore, each of the undersigned hereby authorizes you to release to Wylie & c. d/b/a Wylie Manufacturing Company and/or any agent or employee thereof, any information requested by & Sons, Inc. d/b/a Wylie Manufacturing Company.						
A photocopy of this authorization may be deemed to be the equivalent of the original authorization							
Inc. d/b	dersigned certifies that all the information provided is complete, true and correct and authorizes Wylie & Son, a Wylie Manufacturing Company and/or its agent to obtain credit reports and/or to check the individual and/or is credit rating of both the business and the individual(s).						
By:	Date:						

By:

Signature of Applicant/Title

Date:

APPLICATION FOR CREDIT, AUTHORIZATION, AND CREDIT AGREEMENT

I. Applicant Information

Name of Firm Or Individual (Full Legal Name)				SSN# or Fed. Tax I.D. No		
Billing .	Address	····		Years at this a	ddress	
City	State	Zip		Area Code	Phone	
E-mail	1.77					
	PPLICANT HEREBY APPLIF AINED IN THE "CREDIT A			E WITH THE TERM	IS AND CONDITIONS	
	WYLIE & SON		WYLIE MANUFACT 702 E. 40 th Street Lubbock, Texas	URING COMPAN	ΝY	
	•		II.			
	Cre	dit Infor	mation And Refe	erences		
A.	Confidentiality: In order to to hereinafter as "Wylie"), req but not limited to the execution of however, Wylie Manufacturing	uires that you of the "Author	provide the information recrization to Obtain Financia	quested in Part II of t al Information". In pr	his application, including occessing your application	
В.	Ownership: Please fill in th	e information	requested in the blank space	ces provided below:		
1.	The Applicant is aSole F or a Limited Partnership.	Proprietorship	p, Partnership, (Corporation, Lim	ited Liability Company,	
2.	If the Applicant is an entity plear Formation (attached to your applicant)	ase provide (a) plication); and) the State of Organization: I (c) the File Number	; (b) a co	py of the Certificate of	
3.	In the spaces below please list o act for and on behalf of applica containing the remaining inform	nt. Should th				
	Name(s) of Authorized Agents		Title	Pho	ne	

C.	Finance:				
	Name of Bank	· · · · · · · · · · · · · · · · · · ·		Address	
	Bank Officer or Department	Phone Number			•
D.	References:				
1.	Business Name	Complete Address		Zip	Phone
2.			·		
E.	Authorization To O	btain Credit Inform	ation		
	Please review and execut	e the Authorization To Ob	otain Credit	Information.	
F.	Terms Of Credit				
	Agreement. In filling out	this application please rev	view the Cr	edit Agreement	and conditions of the Cred carefully when completing it e approval of your application
			Signature	of Applicant	Date
			Title	· · · · · · · · · · · · · · · · · · ·	
	P	LEASE DO NOT WRIT	E BELOW	THIS LINE	
Salesman		_	Territory	· ·	
Salesma	n Recommendations				
					