



3D Stone, Inc

6700 South Victor Pike
Bloomington, IN 47403

CREDIT APPLICATION AND ACCOUNT INFORMATION
(CONFIDENTIAL)

Company Name _____
Billing Address _____
City _____ County _____ State _____ Zip _____
Telephone: Office (____) _____ Fax (____) _____ Mobile(____) _____

ORGANIZATIONAL INFORMATION

Please check one of the following:

Corporation _____ Limited Liability Company _____ Partnership _____ Individual /Sole Proprietor_

If you are incorporated or an LLC Company, state the:

Date of creation _____ State of creation _____

Federal ID Number _____ Tax Exempt Number: Yes(____) No(____)

If tax exempt, certificate must be attached.

How many years have you been in business? _____

Were any principals in business before: Yes(____) No(____)

If so, please give name of business and reason for discontinuing _____

Has bankruptcy ever been filed? Yes(____) No(____) If yes, give date: _____

Will signed purchased orders be issued? Yes(____) No(____)

If an individual complete the following:

Business Phone(____) _____ Home Phone(____) _____

Place of Employment _____

We have regular credit accounts with the following and authorize you to contact them for necessary credit information.

TRADE REFERENCES

Name _____
Address _____
City, State, Zip _____
Telephone Number(____) _____
Fax Number(____) _____

Name _____
Address _____
City, State, Zip _____
Telephone Number(____) _____
Fax Number(____) _____

Name _____
Address _____
City, State, Zip _____
Telephone Number(____) _____
Fax Number(____) _____

Name _____
Address _____
City, State, Zip _____
Telephone Number(____) _____
Fax Number(____) _____

BANK REFERENCES

Name and Address _____
Type of Account: Loan _____ Checking _____ Contact _____
Telephone(____) _____ Account Number _____

Name and Address _____
Type of Account: Loan _____ Checking _____ Contact _____
Telephone(____) _____ Account Number _____

It is agreed all invoices will be paid in accordance with terms shown on invoice. Any invoices not paid Within designated terms shall be considered past due and shall be charged 1 1/2 % interest per month on unpaid balances, or the maximum rate permitted by applicable state law, whichever is lesser. We, the undersigned, understand, acknowledge, and accept the Company terms of sale and certify the information given herein is true and correct.

If this application is accepted, I agree to bear all reasonable charges incurred in collecting this account including, but not limited to, service charges, all attorney's fees, and court cost.

I understand that this application must be signed by a corporate officer, LLC member, partner or owner with full authority to bind the applicant to a credit agreement. The undersigned has full authority to obligate and bind the applicant to the terms and conditions of a credit agreement with 3D STONE, INC..

If this application is accepted and applicant makes purchases on credit, applicant gives to 3D STONE, INC. a security interest in all of the goods, inventory and/or equipment purchased from 3D STONE, INC. and the proceeds thereof. Upon request, applicant shall execute any additional documents needed by 3D STONE, INC. to perfect the security interest.

By: _____ Date: _____
APPLICANT (SIGNATURE)
Date of Birth: _____ Social Security Number: _____
Title: _____

INDIVIDUAL GUARANTEE
NOT TO EXCEED (10) YEARS

In consideration with 3D STONE, INC. (jointly and severally herein after referred to as the Company), extending credit after date of invoice, the undersigned, jointly and severally, and unconditionally guarantee and promise to pay the Company on demand any and all indebtedness between the Company and above named applicant, save that of payment. It is further agreed that the Company shall have a security interest in all goods, inventory, and/or equipment purchased from the Company, and all the proceeds thereof pursuant to this credit agreement, and by signing this security agreement, we are agreeing to execute any additional documents needed by the Company to perfect this security interest.

By: _____ Date _____
GUARANTOR

GUARANTOR DATE OF BIRTH: _____
GUARANTOR SOCIAL SECURITY NUMBER: _____

Please return (1) signed Credit Application and Account Information and (2) Tax Exempt Certificate, if applicable, to:

3D Stone, Inc.
6700 South Victor Pike
Bloomington, IN 47403
Attn: Credit Department
Phone: (812) 824-5805
Fax: (812) 824-5809