WINSTEL CONTROLS INC.

WWW.WINSTELCONTROLS.COM

10126 Transportation Way Cincinnati, OH 45246 Phone (513) 251-4343 Fax (513) 251-4388 208 North B Street Hamilton, OH 45013 Phone 513-863-8600 Fax 513-863-3462 2822 Spring Grove Ave. Cincinnati, OH 45225 Phone 513-541-2142 Fax 513-541-8606

APPLICATION FOR CREDIT

GENERAL INFORMA	ATION			
COMPANY		PH	ONE	
BILLING ADDRESS_			(
-				
EMAIL	LWEBSITE			
SHIPPING ADDRESS	3			
NATURE OF BUSINE	ESS			_
DO YOU REQUIRE A P.O.#? () YES () NO		SALES TAX: () EXEMPT (Please attach certificate) () NOT EXEMPT		
BUSINESS TYPE:	() CORPORATION () PARTNERS	SHIP () SOLE PROPRIETORSHIP	()L.L.C	
FOR CORPORATION	N OR LLC, THIS SECTION MUST BE COMP	PLETED:		
DATE & STATE OF INC.		FEDERAL TAX I.D. #		
NAME		TITLE		-
NAME		TITLE		-
FOR PARTNERSHIP	* OR SOLE PROPRIETORSHIP, THIS SEC	TION MUST BE COMPLETED:		
OWNER		SOCIAL SECURITY #_		
HOME ADDRESS				_
		*For partnership, please use extra sheet for other partner's info.		
TRADE REFERENCI	ES (FAX NUMBER IS REQUIRED)			
FIRM		FIRM		_
	FAX		FAX	_
ACCT #	CONTACT	ACCT#	CONTACT	-
FIRM		FIRM		_
PHONE	FAX	PHONE	FAX	_
ACCT #	CONTACT	ACCT#	CONTACT	-
BANK REFERENCE	S (FAX NUMBER AND ACCOUNT NU	MBER REQUIRED)		
BANK NAME		BANK NAME		
PHONE	FAX	PHONE	FAX	_
ACCT#	CONTACT	ACCT#	CONTACT	

WINSTEL CONTROLS APPLICATION FOR CREDIT

CONTACT INFO				
ACCOUNTS PAYABLE CON	ITACT	_PHONE		
A/P EMAIL		FAX		
BILLING PREFERENCE:) FAX		
TERMS OF SALE				
	jes of 1 1/2% per month. In	(Seller) terms of Net 30 Days, and agree that should applicant's account become past due, applicant n addition, should applicant's account be placed for collection, applicant agrees to pay reasonable		
		in connection with this application, and to obtain further credit information from any of the persons or firms e now and at any time it deems necessary to update it's credit files.		
I/we agree that a new applic	cation may be required if t	he account remains inactive for more than 1 year.		
I hereby certify that the abo	ve information is true and	correct, and I agree to pay my account according to the terms and conditions referenced above.		
SIGNATURE OF APPLICAN	T	DATE		
PRINT NAME OF ABOVE		TITLE		
PERSONAL GUARNATEE				
For good consideration, and (Customer Business Name or hereinafter due Creditor f), it is hereby agreed that	INSTEL CONTROLS INC (Creditor), to extend credit to the undersigned does hereby guaranty to Creditor the prompt, punctual and full payment of all monies now		
adjustment, forbearance, w	aiver, release or discharge	unt or duration and shall remain in full force and effect notwithstanding any extension, compromise, e of any party obligor or guarantor, or release in whole or in part of any security granted for said and the undersigned waives all notices thereto.		
		ection of Creditor, shall be primary and not necessarily secondary, and Creditor shall not be required to forcing its rights under this guaranty against the undersigned.		
The guaranty hereunder shall be unconditional and absolute and the undersigned waive all rights of subrogation and set-off until all sums under this guaranty are fully paid. The undersigned further waives all suretyship defenses or defenses in the nature thereof, generally.				
In the event payments due under this guaranty are not punctually paid upon demand, then the undersigned shall pay all reasonable costs and attorney's fees necessary for collection, and enforcement of this guaranty.				
If there are two or more guarantors to this guaranty, the obligations shall be joint and several and binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives.				
The guaranty may be terminated by any guarantor upon fifteen (15) days written notice of termination, mailed certified mail, return receipt requested to the Creditor. Such termination shall extend only to credit extended beyond said fifteen (15) day period and not to prior extended credit, or goods in transit received by Customer beyond said date, or for special orders placed prior to said date notwithstanding date of delivery. Termination of this guaranty by any guarantor shall not impair the continuing guaranty of any remaining guarantors of said termination.				
		has full authority to enter into this guaranty. This guaranty shall be binding upon and inure to the benefit of expresentatives. This guaranty shall be construed and enforced under the laws of the State of Ohio.		
SIGNATURE OF GUARANT	OR	DATE		
PRINT NAME OF ABOVE				
SS# OF GUARANTOR		HOME PHONE		
HOME ADDRESS CITY S	STATE & ZIP			