



Thank you for your interest in Royal Industries, Inc.

Please fill ALL of the information on the attached Credit Application.

To speed up the credit approval process, we need to know the principals of your company, your purchasing agent, if your premises is owned or leased, and your credit requirements. We have included our “Bank Authorization Form for the Release of Credit Information”. Make certain that this is completely filled out and included when returning your credit application to us.

Please fax all completed forms with a copy of your resale certificate to 773-478-4948 to begin the credit process.

Thank you for your prompt attention.

Sincerely,

Royal Industries, Inc.

Credit Department

Please take a moment to tell us where you heard of us?

- Royal website
- Other Website _____
- Email promotion
- Referred by _____
- Mailed flyer
- Royal Sales Rep. _____
- Buying Group _____
- Other _____



BANK AUTHORIZATION FORM
FOR THE RELEASE OF CREDIT INFORMATION

Date: _____

Re: _____

Account Name: _____

Account Number: _____

Name of Bank: _____

Attn: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: _____ **FAX:** _____

You are hereby authorized to provide Royal Industries, Inc., Chicago, Illinois; all needed credit information with regard to the above noted account to enable us to establish an open credit account with them.

Thank you for your cooperation.

Authorized by:

Print Name

Signature

Date: _____

COMPANY INFORMATION

Business Name: _____ Requested Line of Credit:\$ _____

D/B/A Name: _____ FED ID#: _____

Phone #: _____ FAX #: _____ State Resale #: _____ Website: _____

Bill to Address: _____ For Past _____ years.

City: _____ State: _____ Zip: _____

Ship to Address*: _____ For Past _____ years.

City: _____ State: _____ Zip: _____

*If multiple ship locations, please attach on separate sheet. Buying Group: _____

Former Business Address (if applicable): _____

Ownership: Sole Proprietor Partnership Corporation Number of Employees: _____ Est. Annual Sales:\$ _____

Is Store: Owned Leased Years remaining on lease: _____

Type of Business: _____ Date Established: _____ Years in Business: _____

Mortgage Holder/Landlord: _____ Ph #: _____

Address: _____

PRINCIPALS

Name: _____ Title: _____ S.S.#: _____

Name: _____ Title: _____ S.S.#: _____

TRADE REFERENCES

Name: _____ Ph #: _____ Fx#: _____

Addr: _____ City: _____ State: _____ Zip: _____

Name: _____ Ph #: _____ Fx#: _____

Addr: _____ City: _____ State: _____ Zip: _____

Name: _____ Ph #: _____ Fx#: _____

Addr: _____ City: _____ State: _____ Zip: _____

BANK REFERENCE

Name: _____ Addr: _____

Acct: _____ Contact: _____ Ph #: _____ Fx#: _____

Has the firm or principals ever been Bankrupt? Yes No If Yes, explain: _____

SIGNATURES

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed, and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. It is understood that all billing of accounts receivables and credit are processed through our headquarters in Cook County, Chicago, Illinois. It is understood that in the even of a suit or action, it is understood that Cook County, Chicago, Illinois at the option of Royal Industries, Inc. is the venue for litigation. I/We understand that I/We are waiving our right to litigate outside of Cook County, Illinois.

The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Business Name: _____

Name: _____ Title: _____ Signature: _____

Name: _____ Title: _____ Signature: _____

PERSONAL GUARANTEE

In consideration for Royal Industries, Inc. extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to Royal Industries, Inc. by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between Royal Industries, Inc. and the business. Royal Industries, Inc. shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by Royal Industries, Inc. .

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by Royal Industries, Inc. . Said notice shall specify the date on which this guaranty is to be terminated; said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date: _____ Name: _____
(Name of person guaranteeing payment, NO TITLE)

Home Address: _____

Home Phone #: _____ SS#: _____

Signature of person guaranteeing payment: _____

Name of Business whose account is guaranteed: _____

----- CREDIT DEPARTMENT USE ONLY -----

Date: _____ Line of Credit: Approved / Denied Amount \$: _____

Comments: _____ Sales Rep: _____

REQUIRED CONTACT INFO
(please fill out as much as possible)



PURCHASERS:

Name: _____ Name: _____
Title: _____ Title: _____
Phone: _____ Phone: _____
e-Mail: _____ e-Mail: _____
Location: _____ Location: _____

Name: _____ Name: _____
Title: _____ Title: _____
Phone: _____ Phone: _____
e-Mail: _____ e-Mail: _____
Location: _____ Location: _____

SALES PERSONS:

Name: _____ Name: _____
Title: _____ Title: _____
Phone: _____ Phone: _____
e-Mail: _____ e-Mail: _____
Location: _____ Location: _____

Name: _____ Name: _____
Title: _____ Title: _____
Phone: _____ Phone: _____
e-Mail: _____ e-Mail: _____
Location: _____ Location: _____

ACCOUNTS PAYABLES:

Name: _____ Name: _____
Title: _____ Title: _____
Phone: _____ Phone: _____
e-Mail: _____ e-Mail: _____

INVOICE DELIVERY:

e-Mail: _____ Fax: _____

ADDITIONAL INVOICE RECIPIENTS:

e-Mail: _____ Fax: _____
e-Mail: _____ Fax: _____