



Date: _____

Application for Credit

Please provide company information listed below.

Company Name _____

Address _____

City _____ State _____ Zip Code _____

Owners Name _____

Date Established _____

Phone # _____ Email _____

Check all that apply

_____ Corporation

_____ LLC

_____ Partnership

_____ Individually Owned

MN Tax Information

_____ Sales Tax Exempt

_____ Not Sales Tax Exempt

(If you are Sales Tax Exempt please submit an ST3 form)

List Your Credit References

These must be businesses you currently have charge privileges with. Please list as many as you can.

Name _____ Phone # _____

Account # _____ Fax # _____ Email _____

Name _____ Phone # _____

Account # _____ Fax # _____ Email _____

Name _____ Phone # _____

Account # _____ Fax # _____ Email _____

Name _____ Phone # _____

Account # _____ Fax # _____ Email _____

Bank _____ Phone Number _____

The applicant listed above has applied for credit with Plaisted Companies, Inc. The undersigned as agent for applicant authorizes the release of any information necessary to determine or evaluate the extension of credit at any time by this company.

Signature _____

(Signature of Officer, Owner or Partner)

Additional Contact Information

We ask that you provide us with any additional Contact information here. This would be used when a Dispatcher has a question for a load being picked up, delivery being made, or product being used during business hours.

Name _____ Position _____ Phone # _____

Accounts Payable Contact

Please provide the best contact for our billing department.

Name _____ Email Address _____

Phone Number _____

Credit Terms

All invoices are due NET 20 days. Invoices not paid within 20 days shall bear interest at the rate of 1.5% per month (18% annually) or such maximum rate as allowed by law. Plaisted Companies, Inc. reserves the right to charge a service fee on all NSF check returns not to exceed the legal limit. Customer will pay all of Plaisted Companies Inc.'s expenses, including reasonable attorney fees, incurred in collecting any amounts from customer. I certify that all information on this application is correct and that I fully understand the credit terms as stated in this application. I (we) agree to proper payment as invoiced in consideration for credit extended.

Legal Name of Customer _____

Signature _____

(Signature of Officer, Owner or Partner)

Personal Guarantee

In consideration of the foregoing credit extended by Plaisted Companies, Inc. ("Plaisted") to the above-named customer ("Customer") from which I will benefit, and at the request of the undersigned and on the faith of this guarantee, the undersigned does hereby personally guarantee and promise to pay on demand any obligation of Custer to Plaisted, including interest and finance charges. Further, the undersigned will pay all of Plaisted's expenses. Including reasonable attorney fees, incurred in collecting said amounts, or incurred in enforcing this guarantee. I hereby waive notice of sales to Customer, and of the terms thereof, and of non-payment or other default or dispute with Customer. This Personal Guarantee shall be governed by, construed, and enforced in accordance with the laws of the State of Minnesota. I consent to the venue of any lawsuit about or relating to this Personal Guarantee or any other matter about or relating to same in Sherburne County District Court, Sherburne County, Minnesota.

Signature _____ Date _____

(Individual Guarantor)

Name & Address _____

Please send this Credit Application to one of the following.

MAILING ADDRESS

PO Box 332
11555 205th Ave NW
Elk River, MN 55330

FAX NUMBER

763-441-7782

EMAIL ADDRESS

EDvorak@plaistedcompanies.com

or

MNilson@plaistedcompanies.com