

Coastal Paper and Chemical Supply, Inc.

APPLICATION FOR CREDIT

Company name _____ Corporate Name _____
 Billing address _____ City, State, Zip _____
 Shipping address _____ City, State, Zip _____
 Phone _____ Fax _____ e-mail address _____
 Special delivery instructions _____
 Account payable contact _____ Phone _____ Fax _____

The following information must be provided. It will be held in the strictest confidence.

Check one Corporation Partnership Individual Fed ID# (SSN for individuals) _____
 Type of business _____ Date started ____/____/____ Estimated monthly purchase _____

Corporate officers or owners:

Name _____ Phone _____
 Address _____
 Name _____ Phone _____
 Address _____
 Name _____ Phone _____
 Address _____

Bank information:

Name _____ Account# _____
 Address _____
 Bank contact _____ Phone _____

Trade references (3 required from within our industry)

Company _____ Account# _____
 Phone _____ Fax _____
 Company _____ Account# _____
 Phone _____ Fax _____
 Company _____ Account# _____
 Phone _____ Fax _____

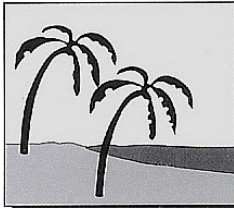
Credit Terms and Conditions:

Personally Guaranteed Signature	Printed Name	Title	Date

I/We certify that all of the information on this Application for Credit is true and correct. I/We understand and agree that payment in full is due within seven (7) days following the purchase, that a finance charge of 2% per month will be charged on all balances seven (7) days overdue and I/We agree to pay the charge. All past due accounts exceeding approved credit limits will be placed on C.O.D. In the event that the amount owed by the Applicant to Coastal Paper and Chemical Supply, Inc. ("Coastal"), is not paid, the Applicant agrees to pay all costs and expenses of collection, including, but not limited to reasonable attorney's fees incurred by Coastal, by suit or otherwise. I/We grant Coastal permission for the above references and bank to supply credit information to Coastal and credit reports to be obtained.

864 S.E. 46th Lane ♦ Cape Coral, FL 33904 ♦ Ph (239) 542-1970 ♦ Fax (239) 542-5080

Paper ♦ Janitorial Supplies ♦ Glassware ♦ Food Products ♦ Floor Specialist on Staff



Coastal Paper and Chemical Supply, Inc.

GUARANTY OF PAYMENT OF ACCOUNT

1. If the above named Applicant defaults in making payment on this account or before the 25th of the month following purchase, the undersigned person(s) guarantee payment of and will pay on demand, the unpaid balance due Coastal from said applicant, including, but not limited to interest at the rate of 2% per month.
2. The undersigned also agrees to pay all costs and expenses of collection, including, but not limited to reasonable attorney's fees incurred by Coastal, by suit or otherwise.
3. I/We grant Coastal permission for the references and bank listed in the Application for Credit to supply credit information to Coastal and credit reports to be obtained.

_____ Signature - Individually	_____ Printed Name of person making guaranty	_____ S.S.#	____/____/____ Date
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_____ Signature - Individually	_____ Printed Name of person making guaranty	_____ S.S.#	____/____/____ Date
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(DO NOT USE TITLES WHEN SIGNING INDIVIDUALLY)