1530 Farrow Street
Ferndale, Michigan 48220
(248) 582 3430
(248) 582 3435 – facsimile
PGolem@EngineeredAluminumFab.com

FACSIMILE COVER SHEET

Company: Attention:

Fax Number:

Voice Number:

Date: 2009 March 11

Pages: 5 # including cover sheet Subject: ACCOUNT INFORMATION

Thank you for your interest in Engineered Aluminum Fabricators Company.

Initial orders or account activity exceeding two years are subject to cash in advance terms. All prices quoted are net of cash discount. Electronic wire transfer and credit card payment are available for your convenience; however, please contact us regarding non cash associated fees.

Subsequent orders are subject to the following open account terms based on a positive review of credit and bank references, completion of the CREDIT APPLICATION information and are subject to change.

DUE -- NET 30 DAYS OF DELIVERY

ACCOUNTS PAST DUE ARE SUBJECT TO FINANCE CHARGE OF 1.5% PER MONTH OR ANY PORTION THEREOF (18% ANNUALLY). ANY COSTS ASSOCIATED WITH COLLECTION OF PAST DUE ACCOUNTS ARE THE RESPONSIBILITY OF CUSTOMER.

The information contained in this facsimile message is privileged or confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is neither allowed nor intended. If you have received this communication in error, please immediately notify me by telephone at the above number and return the original message to me at the above address. Thank you.



GOODS ONLY GUARANTEED TO THE EXTENT OF REPLACING SUCH PARTS AS PROVE DEFECTIVE. UNDER NO CIRCUMSTANCES WILL WE BE RESPONSIBLE FOR LABOR OR DAMAGES CAUSED BY SUCH DEFECTS.

ALL CLAIMS MUST BE PRESENTED WITHIN 10 DAYS, OTHERWISE WE RESERVE THE RIGHT TO CONSIDER THE INVOICE AND GOODS CORRECT AS RENDERED AND RECEIVED.

NO RETURNS ACCEPTED WITHOUT RETURN MATERIAL AUTHORIZATION. ALL RETURNS MUST BE ACCOMPANIED BY PACKING SLIP.

FOB - FERNDALE, MICHIGAN - insured unless notified in writing

<u>Your order will not be processed</u> until the completion and return of the attached credit application and / or credit card information including signature and date. If terms are only Cash In Advance or Credit Card the credit application is not necessary.

We are committed to providing our customers with quality products at a competitive price and world-class service. We look forward to a mutually profitable relationship.

Regards,

Cre	edit Card Information:
Credit Card Number: Three Digit Verification Number: Credit Card (VISA, M/C): Expiration Date: Name on card: Mailing Address:	
Signature:Print Name:	



CREDIT APPLICATION

Credit Limit Red	quested: \$
	Company Information
Name: DBA (if different) Address City State Zip Code Telephone Facsimile Email Web Site	
□ Partr □ Limite □ Sole	y oration nership ed Liability Proprietor r (specify)
	Federal Tax Identification / Social Security Number State where incorporated How long in business? Number of employees
Name: Address	Bank Reference
City State Zip Code Telephone Facsimile Contact Name Account Number	



Ownership Information

Please complete the below information for all officers, partners, members and owners. Please attach a separate sheet of paper if more space is required.

Name	Title	Ownership	Home Address	Home Phone #
		%		

Trade References

Please list three significant business relationships.

Name	Address	Phone #	Contact

Mortgage Holder/Landlord Information

Do you rent or own pre-	mises that the business occupies?	
Years at location	·	
Mortgage Holder / Land	dlord Name:	
Address		
City		
State		
Zip Code		
Telephone		
Facsimile		
Contact Name		



(1) Has the company or any officer, partner, me bankruptcy? Yes/No (If yes attach detail)	mber, or owner ever filed for
(2) Has your company or any company that any been associated with as an officer, partner, membefore? Yes/No (If yes under what name	per, or owner ever had credit with us
By signing below, I certify that I have the autagreement, and that I agree to creditor's term Fabricators Company., I also agree and accept maybe changed or withdrawn at the sole discretion	is of sale of Engineered Aluminum that the credit limit and credit terms
The information given herein is offered as part extension of credit for commercial business represented by the applicant to be true, corrauthorizes Creditor to investigate all credit refere our credit and financial responsibility. The un trade creditors to provide Creditor with complete evaluation. Applicant Company Name:	use. The information provided is rect and complete. The Applicant nces and other sources pertaining to dersigned authorizes its banks and
Signature:Print Name:	Title: Date:
Personal Guarai	
In consideration of any credit extended, the under	rsigned will personally guarantee full
and prompt payment of all indebtedness of	incurred for
merchandise provided by Engineered Aluminum	Fabricators Company. This personal
guarantee shall remain in force until its revocation	n is acknowledged in writing by
Engineered Aluminum Fabricators Company. Rev	vocation shall not affect
indebtedness incurred prior to receipt of written r	notice.
Individual Signature:	Date:
Print Name:	
Social Security Number	