



CAPITOL INTERIOR PRODUCTS INC.

201 Erie Street, Camden NJ 08102 (856) 576-6964

SALES REP: _____ DATE: _____

CONFIDENTIAL CREDIT APPLICATION

Company: _____ Corporation / Partnership / Proprietor
(Circle One)

Address: _____ Date Established: _____

City/State/Zip: _____ Tax Exempt: YES NO

Phone: _____ If Yea, Attach Tax Exempt Form

Name of Owner(s) or Principal Officer: _____

Address: _____ City: _____ State: _____ Zip: _____

Social Security Number(s) _____

Name of Bank _____ City: _____ State: _____ Zip: _____

Phone: _____ Account #: _____

Federal I.D. #: _____

APPLICANT

Capitol Interior Products, Inc. payment terms are net 25th. This means payment for any material bought in a given month is due by the 25th of the following month.

The undersigned agrees for the applicant to pay invoices in accordance with payment terms above. The undersigned further agrees, for the applicant, to pay cost of collection of any past due balances including reasonable attorneys' fees, and interest at the rate of eighteen percent (18%) per annum on all amounts past due. If the applicant is an entity, the person signing the application on behalf of the applicant warrants that he or she is authorized to do so. If the applicant is not an entity at the time of this application, and the applicant's business becomes an entity with or without the knowledge of Capitol Interior Products, Inc., the applicant agrees to be jointly and severally liable to Capitol Interior Products, Inc. for any indebtedness incurred by or transferred to such entity. This credit application shall be governed by New Jersey Law and the undersigned, as well as any guarantor, irrevocably agrees to submit to the venue and jurisdiction in the State of New Jersey as to any disputes relating (in any way) to this credit application.

This credit application contemplates multiple sales of a variety of materials for incorporation by applicant into one or more improvements located on one or more subdivided or otherwise legally distinct lots, parcels, or units of real property. Applicant agrees that, on the basis of information provided by applicant, Capitol Interior Products, Inc. may designate on the invoice for all materials sold on credit to applicant the lot, unit or parcel into which the material was incorporated and that such designation shall be conclusive and binding as to the use of such materials unless applicant provides to Capitol Interior Products, Inc. in writing a correction of such designation within fifteen (15) days from date of such invoice. The applicant further agrees that all sales designated as aforesaid to a particular lot, unit, or parcel, from the sale to the last sale, shall be deemed to be part of one supply contract applicable to such lot, unit, or parcel for purposes of determining any time requirements applicable to enforcement by Capitol Interior Products, Inc. of any lien or collection rights against such lot, unit, or parcel or other rights of collection for such sales.

I authorized Capitol Interior Products, Inc. to make whatever credit inquiries necessary to process this credit application.

Name (Print): _____ Title (Print): _____

Signature: _____ Date: _____

PERSONAL GUARANTEE

The undersigned guarantor hereby, jointly and severally, personally unconditionally guarantees payment of total sum due for account indebtedness incurred by applicant, including attorney fees and court costs incurred by enforcing the Guaranty. The attorney's fees for enforcing the Guaranty shall be those reasonable attorney fees necessarily incurred by Capitol Interior Products, Inc. to collect the principle indebtedness and accrued interest under Guaranty. This is a continuing Guaranty and until revoked shall cover all future indebtedness of the applicant.

Guarantor Name (Print): _____ Signature: _____

Address of Guarantor: _____

TRADE REFERENCES

1. Name of Reference: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Account #: _____
2. Name of Reference: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Account #: _____
3. Name of Reference: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Account #: _____

PERSONAL REFERENCES

1. Name of Closest Relative: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Contact Person: _____

1. Name of Bonding Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____

1. Other: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____



A GMS COMPANY

CAMDEN YARD

201 Erie Street, Camden, NJ 08102
(856) 576-6964

KEARNEY YARD

47 Sellers Street, Bldg. #18, Kearny, NJ 07032
(201) 998-2400