

New ICM, L.P.

P.O. 1060 El Campo, TX 77437 Tel: 979-578-0543 Fax: 979-578-0503

Credit Application

Firm Name: _____ Phone #: _____
Fax #: _____
Email: _____

Mailing Address: _____
PO Box or Street City State Zip

Shipping Address: _____
Street City State Zip

Number of Years in Business: _____ Was firm recently purchased? _____ If yes, how long? _____
Type of Ownership: Corporation () Partnership () Sole Proprietorship () Other _____
Fed ID # or Social Security Number: _____ Listed in D&B? _____

If individual or partnership, give names or responsible person(s). If Corporation, give names and titles of officers.

Company Owners/Officers:

Name: _____ Title: _____
Name: _____ Title: _____
Name: _____ Title: _____

Bank References

Bank Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact: _____ Account Number: _____

Trade References

Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact: _____ Account Number: _____

Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact: _____ Account Number: _____

Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact: _____ Account Number: _____

I hereby release the above creditors to give credit information.

Recent financial statements should accompany this application

SALES TAX EXEMPTION: I(we) hereby certify that all purchases from New ICM, L.P. **are** () or **are not** () for resale and as such are tax exempt based on the mark previously noted. In the event this document is NOT PROPERLY MARKED as tax exempt all purchases will be made with sales tax included until such time as a proper tax exempt number is provided to New ICM, L.P. Should any items purchased from New ICM, L.P. be ultimately consumed by us, we accept responsibility for paying the appropriate state use tax.

Our state tax exempt information is as follows:

Tax Number: _____ State: _____

CREDIT AGREEMENT: In consideration for extension of credit, Debtor (the above named Firm or Individual) agrees to credit terms as specified, and in the event Creditor (New ICM, L.P.) brings suit on any debt owed by Debtor, the Creditor shall be entitled to recover, in addition to the amount of the debt, all costs and expenses of collection and/or litigation, including a reasonable attorney fee, and any accrued interest allowed by law.

Further, the undersigned certifies that the information provided is true and complete, and authorizes New ICM, L.P. to investigate the references, statements or other data provided, in conjunction with any investigation of this application or later extension or renewal of credit, a business information report may be ordered at New ICM, L.P.'s discretion. Credit privileges granted hereunder may be temporarily suspended or permanently terminated by NEW ICM, L.P. upon Debtor's failure or refusal to comply with the specified credit terms granted to Debtor.

Debtor hereby agrees to pay all amounts owed within the credit terms established with the Debtor. Payments received beyond those terms shall incur a finance charge of 2% per month on any unpaid balance. A minimum of \$ 4.00 per month will be assessed for past due balances on your account. Finance charges will be billed on statement only. No separate invoice will be sent.

Applicants Signature

Title

Date