CLEVELAND CITY FORGE, INC.

CREDIT APPLICATION

46950 State Route 18 West Wellington, OH 44090
Toll Free: (800) 431-4350 Fax: (440) 647-4185

RETURN CREDIT APPLICATION TO THE ACCOUNTING DEPT:
FAX: 440-647-1970 or EMAIL: mpolen@ccforge.com

Business Name _____

Mailing Address _____ How Long?____
(Street) (City) (State) (Zip)

Shipping Address_____
(Street) (City) (State) (Zip)

Phone (_____)_____-_____ Fax (_____)_____-_____

DBA _____ Federal Tax ID Number _____

Former Business Address (If Any) _____
(Street) (City) (State) (Zip)

Type of Business _____ Date Established _____

License Required by State, County or City? _____Yes _____No

If Yes, License # _____ Sales Tax: _____Taxable

SIC Code(s) _____ _____Tax Exempt

OWNERSHIP: _____Sole Owner _____Partnership _____Corporation

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

BANK REFERENCE: _____Checking _____Loan _____Savings

_____
(Bank Name) (Contact) (Address/ Phone #)

_____
(Bank Name) (Contact) (Address/ Phone #)

_____
(Bank Name) (Contact) (Address/ Phone #)

CLEVELAND CITY FORGE, INC.

TRADE REFERENCES: (suppliers of major products & services)

(1) _____
(Company) (Address) (Phone #)

_____
(Contact) (Email) (Fax #)

(2) _____
(Company) (Address) (Phone #)

_____
(Contact) (Email) (Fax #)

(3) _____
(Company) (Address) (Phone #)

_____
(Contact) (Email) (Fax #)

(4) _____
(Company) (Address) (Phone #)

_____
(Contact) (Email) (Fax #)

# of Employees _____ Estimated Annual Sales _____

Sales Area _____

Has the firm or any Principals ever declared Bankruptcy? _____Yes _____No

If yes, explain: _____

Who should we contact regarding your account with us? _____

Title: _____ Email: _____

The undersigned acknowledges reading and accepting Cleveland City Forge, Inc. standard terms and conditions of sale including standard payment terms of net 30 days from date of invoice. The applicant further agrees to assume all costs incurred to collect any past due, unpaid balance, including interest accrued as allowed by state law as well as any reasonable attorney's fees incurred. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct and by signing this application, you are authorizing Cleveland City Forge, Inc. to investigate the credit references listed above.

_____
(Signature) (Name & Title) (Date)