

Name: _____

Ship To Address: _____ City, State, Zip: _____

Bill To Address: _____ City, State, Zip: _____

Attention: _____

Phone Number: () _____ Fax Number: () _____

TYPE OF BUSINESS

Corporation Partnership Sole Proprietor Personal

LIST OF OFFICERS, PARTNERS OR PRINCIPALS

TITLE

1. _____
2. _____
3. _____

CONCERNING YOUR FACILITIES, DO YOU?

Own Lease Rent

BANK REFERENCE

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____ Fax Number: () _____

Account Number(s): _____

Officer in charge of account: _____ Phone Number: () _____

TRADE REFERENCES

Name:	Address:	City:	State:	Zip:
1. _____	_____	_____	_____	_____
Phone Number: () _____	_____	Fax Number: () _____	_____	_____
2. _____	_____	_____	_____	_____
Phone Number: () _____	_____	Fax Number: () _____	_____	_____
3. _____	_____	_____	_____	_____
Phone Number: () _____	_____	Fax Number: () _____	_____	_____

The more information we have, the better we are able to grant credit. Please complete the summarized balance sheet and sales information to the extent possible.

Current Assets: _____	Total Current Liabilities: _____
Fixed Assets: _____	Total Long Term Liabilities: _____
Total Other Assets: _____	Total Equity: _____
Total Assets: _____	Total Liabilities & Equity: _____
Last completed year total annual sales: _____	

How long have you been in business?: _____

Has the owner or officer filed bankruptcy?: _____

Estimated high purchases desired (monthly): _____

Estimated average purchases desired (monthly): _____

Comments (attach as needed): _____

Security Agreement: T.O. Plastics will retain a security interest in each item purchased under this agreement until such item is paid in full. For items purchased on different dates, the first purchased will be considered the first paid for. If an outside attorney is required for collection, the purchaser will pay reasonable attorney's fees and court costs as permitted by law.

I understand invoices due to T.O. Plastics, must be paid by the date shown on the invoice. We authorize the above bank, trade references to release account information to T.O. Plastics, Inc.

Signed: _____ Title: _____ Date: _____