



CREDIT APPLICATION

Business Name: _____

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

Phone: _____ Fax: _____ Alternate Phone: _____

Accounts Payable Contact: _____ Accounts Payable Phone: _____

Years in Business: _____ at Current Location: _____ Type of Business: _____

Requested Credit Limit: \$ _____ FLI Point of Contact: _____

Corporation: (State: _____) Partnership: Proprietorship:

Principals of Business: (President, Vice President; all partners, all owners)

<u>Name</u>	<u>Address</u>	<u>Position</u>

BANK REFERENCE: CHECKING ACCOUNT

Bank Name: _____ Bank Officer: _____

Address: _____ Phone: _____

Approximate Balance: _____ Account Number: _____

BANK REFERENCE: LENDING

Bank Name: _____ Bank Officer: _____

Address: _____ Phone: _____

Approximate Loan Balance: \$ _____ Monthly Payment: \$ _____

Loan Secured: Yes No: Collateral: _____

CREDIT REFERENCES:

1. _____ Maximum Credit Line: \$ _____ Years Credit Exist: _____

Address: _____

Phone: _____ Fax: _____ Contact: _____

2. _____ Maximum Credit Line: \$ _____ Years Credit Exist: _____

Address: _____

Phone: _____ Fax: _____ Contact: _____

3. _____ Maximum Credit Line: \$ _____ Years Credit Exist: _____

Address: _____

Phone: _____ Fax: _____ Contact: _____

NOTICE OF TERMS OF SALE

Invoices are due in full, thirty (30) days from date of invoice. After such thirty (30) days, invoices shall bear interest on outstanding balance at 18% per annum. Payments shall be applied against oldest invoice outstanding. If an attorney or collection agency is retained to collect any balance due, Customer agrees to pay attorney fees equal to 25% of the outstanding balance and agrees that such 25% is fair and reasonable.

All accepted orders, whether or not delivery dates are specified in the purchase order confirmation shall be subject to delays or failures in manufacture or delivery due to any cause, and FLI makes no promises or representation as to delivery dates of product availability.

Under no circumstances shall FLI be liable for any consequential, special, or incidental damages and Customer's sole remedy or right of recovery for any action of omission by FLI or any breach by FLI of the terms shall be the recovery of any sums actually paid to FLI as to any invoice, product, or order upon which Customer is specifically making claim. Customer acknowledges that it may not make claim against FLI for any lost profits or sales, expenses, damages, or otherwise, and its sole right of recovery against FLI, directly and indirectly, is the aforementioned amounts actually paid FLI for the product for which claim is being made. If any claim by Customer relates to an invoice or for purchase of product which has not been paid for, Customer shall not be entitled to make any claim for damages, injury, expense or the like, it being clearly understood by Customer that payment of its obligations to FLI is a condition precedent to any claim it might otherwise make against FLI.

Customer and FLI agree that the exclusive venue and jurisdiction for any legal or equitable action brought by either of them should be any court of competent jurisdiction in the State of Kansas. The rights and obligations of the parties shall, in all respects, be governed by Kansas law without regard to any conflict of law principles to the contrary.

Please attach a copy of the last annual Balance Sheet and Profit/Loss Statement. The undersigned, individually and in his/her capacity as an officer/partner of Customer (if applicable) hereby acknowledges that the foregoing credit information is true and accurate and acknowledges that FLI is relying upon such information in its decision to extend credit to Customer. The undersigned further acknowledges that neither that person, an individual, nor Customer have ever filed bankruptcy and have not been refused credit within the last 48 months. If either has been refused credit or has filed for bankruptcy, that information is contained above. Customer hereby authorizes the release of credit information as required or needed by FLI.

Date: _____ Company Name: _____

Printed Name & Title: _____

Signature: _____