

Date:

Application for Credit			Check all that apply	
Please provide company	information listed below.			
Company Name			CorporationLLCPartnership	
				City
Owners Name			MN Tax Information	
Date Established			Sales Tax Exempt	
			Not Sales Tax Exempt (If you are Sales Tax Exempt please submit an ST3 form)	
List Your Credit	References			
These must be business	es you currently have charg	e privileges with. Please list as many as	you can.	
Name		Phone	#	
Account #	Fax #	Email		
Name		Phone	#	
Account #	Fax #	Email		
Name		Phone	#	
Account #	Fax #	Email		
Name		Phone	#	
Account #	Fax #	Email		
Bank	Phone Number			
• •	· · · · · ·	th Plaisted Companies, Inc. The undersi or evaluate the extension of credit at a	gned as agent for applicant authorizes the ny time by this company.	
	Signature			
		(Signature of Officer, Owner or Partner)		
Additional Con	tact Information			
	s with any additional Contact in nade, or product beina used du		a Dispatcher has a question for a load being	

Name ______ Position _____ Phone # _____

Accounts Payable Contact Please provide the best contact for our billing department. Name _____ Email Address Phone Number _____ Credit Terms All invoices are due NET 20 days. Invoices not paid within 20 days shall bear interest at the rate of 1.5% per month (18% annually) or such maximum rate as allowed by law. Plaisted Companies, Inc. reserves the right to charge a service fee on all NSF check returns not to exceed the legal limit. Customer will pay all of Plaisted Companies Inc.'s expenses, including reasonable attorney fees, incurred in collecting any amounts from customer. I certify that all information on this application is correct and that I fully understand the credit terms as stated in this application. I (we) agree to proper payment as invoiced in consideration for credit extended. Legal Name of Customer (Signature of Officer, Owner or Partner) Personal Guarantee In consideration of the foregoing credit extended by Plaisted Companies, Inc. ("Plaisted") to the above-named customer ("Customer") from which I will benefit, and at the request of the undersigned and on the faith of this guarantee, the undersigned does hereby personally guarantee and promise to pay on demand any obligation of Custer to Plaisted, including interest and finance charges. Further, the undersigned will pay all of Plaisted's expenses. Including reasonable attorney fees, incurred in collecting said amounts, or incurred in enforcing this guarantee. I hereby waive notice of sales to Customer, and of the terms thereof, and of non-payment or other default or dispute with Customer. This Personal Guarantee shall be governed by, construed, and enforced in accordance with the laws of the State of Minnesota. I consent to the venue of any lawsuit about or relating to this Personal Guarantee or any other matter about or relating to same in Sherburne County District Court, Sherburne County, Minnesota.

Please send this Credit Application to one of the following.

(Individual Guarantor)

MAILING ADDRESS

Name & Address _____

FAX NUMBER

EMAIL ADDRESS

_____ Date _____

PO Box 332 11555 205th Ave NW Elk River, MN 55330 763-441-7782

 $\frac{SCraig@plaistedcompanies.com}{DChristen@plaistedcompanies.com}$