B & B SURPLUS INC.

STEEL*ALUMINUM*STAINLESS*PIPE*WIRE*SURPLUS PRODUCTS

7020 ROSEDALE HWY * BAKERSFIELD, CA 93308-5842 OFFICE (661) 589-0381* FAX (661) 589-8936 www.bbmetals.com

APPLICATION FOR CREDIT

Business Name: ______ Phone Number: _____

Billing Address		Fax Number:			
City:Stat	e:Zip:	: Shipping Add	ress:		
A/P Contact Name:	·	City:	State:	Zip:	
A/P Phone Number:		Email:			
A/P Fax Number:		D&B#			
Amount of Credit Reg	<u>uested</u>	Salesmen Name or N	Number:		
<u>G</u>	SENERAL BUS	SINESS INFORMAT	<u>ION</u>		
Type of Business:		Officers Name 8	& Title:		
Purchase Orders/ Job # Required?		Social Security	#:		
Mills Certs Required?		Officers Name	& Title:		
Contractor's License#		Social Security #:			
How long has Applicant been in Business?		How long at pre	How long at present location?		
Resale: Tax will be charge	d until a signed re	esale card is on file to be	Mailed:	to be Faxed:	
	BUSINESS C	REDIT REFERENC	<u>E</u>		
Name:		Account #:			
City	State	Phone:	Fax:		
Name:		Account #:			
City	State	Phone:	Fax:		
Name:		Account #:	·		
City	State	Phone:	Fax:		

The information contained in this application is provided to induce **B&B Surplus**, **INC.** to extend or to continue the extension of credit to me or my designated employees upon my guarantee. I acknowledge and understand that **B&B Surplus**, **INC.** is relying on the information provided herein in deciding to grant or continue credit. I represent, warrant and certify that the information provided herein is true, correct and complete. I authorize **B&B Surplus**, **INC.** to make whatever inquires about me deemed necessary and appropriate for the purpose of evaluating this credit application. This includes, but not limited to obtaining credit bureau reports. I believe my business is financially able to meet any commitment I have made and expect to

pay all invoices according to the terms defined "net 30 days" from the date of invoice. I understand that invoices not paid
within 30 days are subject to a 1-1/2% late charge per month. I further agree to pay all cost incurred in collecting any
amounts past due, including reasonable attorney fees and that the litigation jurisdiction is Bakersfield, Kern County,
California. I further agree that any change in address, telephone, business name or and ownership will be made known
within 10 days after occurrence.

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Signature	Print Name	Date
Signature	Print Name	Date

CORPORATE GUARANTEE

Applicant has carefully read this application and finds that all representations are true and correct. In any action to collect this debt, the prevailing party shall be entitled to attorney's fees and court cost. In the event of a legal dispute between the parties, the applicant understands that **B&B Surplus**, **INC** will retain this application whether or not it is approved.

Corporate Name		Date	
Signature of Officer	Print Name	Title	

INDIVIDUAL PERSONAL GUARANTEE

I, the understanding, for and in consideration of extending credit at my request does hereby individually and personally guarantee to **B&B Surplus, INC.** located in the State of California the payment of any obligation of the Company and I hereby agree to bind myself to pay you on demand and sum which may become due to you by the company whenever the company shall fail to pay the same. It is understood that this guaranty shall be continuing and irrevocable and indemnity for such indebtedness of the company. I do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of credit agreement hereby guaranteed. (This must be signed if not incorporated)

Account Name:	Signature	
Diagon Drints	Data	
Please Print:	Date:	

Return Completed application to:

B&B Surplus, Inc. Attn: Credit Manager

7020 Rosedale Hwy. Bakersfield CA. 93308 Phone: (661) 589-0381 Fax: (661) 589-8936

Email: kjohansen@bbmetals.com OR tstone@bbmetals.com

(PLEASE MAIL THE ORGINAL IF YOU ARE FAXING OR EMAILING.)

FOR B&B CREDIT DEPT.	ONLY CREDIT APPROVE	ĺ
HOLD:	DATE:	
TERMS: A	MOUNT:	
CUSTOMER	? #:	