

MASTEL PRECISION

CUSTOMER INFORMATION

2843 SAMCO ROAD, SUITE A
RAPID CITY, SD 57702-9366
PH: (800) 657-8057 FAX: (605) 343-3631

CREDIT APPLICATION

| | |
|--------|-------|
| Acct#: | _____ |
| Date: | _____ |

COMPANY NAME _____

CORPORATION: State of _____ PARTNERSHIP _____ SOLE PROPRIETOR _____ OTHER _____

YEARS IN BUSINESS _____ Phone (____) _____ - _____ Fax (____) _____ - _____

BILLING ADDRESS _____

SHIPPING ADDRESS (if different) _____

Email address: _____ Website address _____

Invoices and statements will be mailed to 'Billing Address' only. Additional shipping addresses and addresses designating 'Sold To' may be submitted on the reverse or a separate page.

PARTNERS/CORPORATE OFFICIALS:

| Name | Address | SSN | Title |
|----------|---------|-------|-------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |
| 4. _____ | _____ | _____ | _____ |
| 5. _____ | _____ | _____ | _____ |

BANKING INFORMATION:

| Bank | Address | Acct # | Type | Contact |
|----------|---------|--------|-------|---------|
| 1. _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ |

TRADE REFERENCES:

| Name | Address | Acct # | Phone # | Contact |
|----------|---------|--------|---------|---------|
| 1. _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ |

AUTHORIZED PERSONS TO CHARGE ON THIS ACCOUNT (If all areas are not fully completed, you assume full responsibility for charges made to this account). (CHECK ONE)

_____ THERE ARE NO RESTRICTIONS AS TO WHO CAN CHARGE TO MY ACCOUNT AND **NO** PURCHASE ORDER IS REQUIRED.

_____ I REQUIRE A PURCHASE ORDER FOR CHARGES MADE TO MY ACCOUNT.

_____ THE FOLLOWING PERSONS ARE AUTHORIZED BY ME TO CHARGE TO MY ACCOUNT WITHOUT A PURCHASE ORDER:

ACCOUNTS PAYABLE CONTACT: _____ PURCHASING AGENT: _____

THE ABOVE INFORMATION IS SUBMITTED FOR THE _____ SIGNED _____

SOLE PURPOSE OF OPENING AN ACCOUNT AND _____ TITLE _____

I HEREBY CERTIFY THE INFORMATION TO BE TRUE. _____ DATE _____

MASTEL PRECISION

CREDIT POLICY

IN CONSIDERATION OF MASTEL PRECISION MAINTAINING A COMMERCIAL CHARGE ACCOUNT, I AGREE TO THE FOLLOWING TERMS AND CONDITIONS REGARDING ALL PURCHASES MADE BY ME OR ANYONE AUTHORIZED BY ME.

- 1.) **ACCEPTANCE.** Use of charge account will constitute acceptance of this agreement. If this is a joint account, each party will be bound by this agreement.
- 2.) **TERMS/PAYMENTS.** On the 15th of each month, Mastel Precision will send me a statement showing all unpaid and partially paid invoices and credit memos. Invoices for an order are sent at the same time the order is shipped. I understand that all charges are due within 30 days of the invoice date (unless arranged and extended by the credit department at the time of purchase), with a 2% discount given if the invoice is paid within 15 days. Accounts with balances 30 days past due will be placed on COD; accounts 60 days past due will be placed on hold (no purchases); accounts 90 days or more past due will be submitted to collections. Accounts 30 and 60 days past due will not be restored to original terms unless the account is paid in full before the 90 day past due date. Accounts sent to collections will not be restored to a credit status and will be restored to COD or Prepayment status only when the total amount due on the account is received.
- 3.) **CREDIT CARDS.** Mastel Precision accepts all major credit cards. Credit card numbers can also be used on the Loaner/Trial Agreements (contact Customer Service/Sales for information) in place of a deposit.
- 4.) **EXTENDED CREDIT ARRANGEMENTS.** If I desire an extended period of time in which to pay for purchases, I agree to contact the credit department and make the necessary arrangements **prior to purchase.**
- 5.) **CHANGE IN TERMS.** Upon prior notice to me, Mastel Precision may change the terms of this agreement. New terms will apply only to purchases made after the effective date of change.
- 6.) **RESTOCKING FEES.** I agree to pay for any restocking fees on merchandise returned. Product credit may be offered for returned merchandise provided:
 - a. The product is returned to Mastel Precision within 30 days of the date of shipment to the customer (unless otherwise agreed to in writing).
 - b. The product is returned, by me, in its original case, and in the exact condition it was received.
 - c. The product passes a mandatory inspection and can be returned to inventory.

All items received after the due date of the invoice are subject to a 15% restocking fee. No credit will be issued for any item returned after 30 days from the date of invoice. If returned goods are damaged, paying the cost of the damage will be my responsibility.

- 7.) **WARRANTY.** Mastel Precision will warranty parts and labor against manufacturing defects up to one year from the invoice date. These defects will be determined by Mastel Precision upon receipt of the item. All other repairs will be the responsibility of me, the customer.
- 8.) **TERMINATION OF THE AGREEMENT.** Mastel Precision reserves the right to terminate, at any time, with or without cause, my right to make further purchases under this agreement. Further, Mastel Precision has the right, if I become delinquent in payments on my account, to turn it over to a collection agency or an attorney at law for collection. I agree to pay reasonable collection fees, attorney fees, and other costs incurred in collection. Mastel Precision agrees to notify me of final demand for payment before the account is turned over for collection.

I HAVE READ THIS CREDIT APPLICATION AGREEMENT AND AGREE TO THE TERMS AND CONDITIONS SET HEREIN. RECEIPT OF A COPY OF THIS AGREEMENT IS ACKNOWLEDGED.

I certify that the information given is true, correct, and complete and is given for the purpose of obtaining credit. You and any other creditor or prospective creditor of the undersigned or and agency employed by you or any of them, are authorized to make investigations concerning the undersigned or concerning the above information and to disclose to each other the information set forth as a result of such investigations. I/We submit and have read this credit application agreement for a commercial charge account. If accepted, I/we agree to the terms above and receipt of a copy of this agreement.

SIGNATURE

TITLE

DATE

SIGNATURE

TITLE

DATE