

WINSTEL CONTROLS INC.

winstelcontrols.com

10126 Transportation Way
Cincinnati, OH 45246
Phone (513) 251-4343
Fax (513) 251-4388

208 North B Street
Hamilton, OH 45013
Phone (513) 863-8600
Fax (513) 863-3462

2822 Spring Grove Ave.
Cincinnati, OH 45225
Phone (513) 541-2142
Fax (513) 541-8606

APPLICATION FOR CREDIT

REVISED 01/16

GENERAL INFORMATION

COMPANY _____ PHONE _____

BILLING ADDRESS _____ FAX _____

EMAIL _____ WEBSITE _____

SHIPPING ADDRESS _____

NATURE OF BUSINESS _____

DO YOU REQUIRE A P.O. #? () YES () NO

SALES TAX: () EXEMPT (*Please attach certificate*) () NOT EXEMPT

BUSINESS TYPE: () CORPORATION () PARTNERSHIP () SOLE PROPRIETORSHIP () L.L.C

FOR CORPORATION OR LLC, THIS SECTION MUST BE COMPLETED:

DATE & STATE OF INC. _____ FEDERAL TAX I.D. # _____

OFFICER NAME _____ TITLE _____

OFFICER NAME _____ TITLE _____

FOR PARTNERSHIP* OR SOLE PROPRIETORSHIP, THIS SECTION MUST BE COMPLETED:

OWNER _____ SOCIAL SECURITY # _____

HOME ADDRESS _____

HOME PHONE _____ *For partnership, please use extra sheet for other partner's info.

TRADE REFERENCES (FAX NUMBER OR EMAIL ADDRESS IS REQUIRED)

FIRM _____

FIRM _____

PHONE _____ FAX _____

PHONE _____ FAX _____

EMAIL _____

EMAIL _____

ACCT # _____ CONTACT _____

ACCT # _____ CONTACT _____

FIRM _____

FIRM _____

PHONE _____ FAX _____

PHONE _____ FAX _____

EMAIL _____

EMAIL _____

ACCT # _____ CONTACT _____

ACCT # _____ CONTACT _____

BANK REFERENCES (FAX NUMBER AND ACCOUNT NUMBER REQUIRED)

BANK NAME _____

BANK NAME _____

PHONE _____ FAX _____

PHONE _____ FAX _____

ACCT # _____ CONTACT _____

ACCT # _____ CONTACT _____

WINSTEL CONTROLS APPLICATION FOR CREDIT

CONTACT INFO

ACCOUNTS PAYABLE CONTACT _____ PHONE _____

A/P EMAIL _____ FAX _____

BILLING PREFERENCE: () U.S.MAIL () FAX _____

() EMAIL _____

BONDING COMPANY

BONDING COMPANY NAME _____ BOND # _____ AMOUNT _____

ADDRESS _____ PHONE _____

TERMS OF SALE

I/we agree to pay according to Winstel Control Inc.'s (Seller) terms of Net 30 Days, and agree that should applicant's account become past due, applicant agrees to pay service charges of 1 1/2% per month. In addition, should applicant's account be placed for collection, applicant agrees to pay reasonable collection costs and/or attorney fees.

I/we authorize the Seller to obtain reports to be used in connection with this application, and to obtain further credit information from any of the persons or firms set forth in this application, and from any other source now and at any time it deems necessary to update it's credit files. I/we agree that a new application may be required if the account remains inactive for more than 1 year.

I hereby certify that the above information is true and correct, and I agree to pay my account according to the terms and conditions referenced above.

SIGNATURE OF APPLICANT _____ DATE _____

PRINT NAME OF ABOVE _____ TITLE _____

PERSONAL GUARANTEE

For good consideration, and as an inducement for WINSTEL CONTROLS INC (Creditor), to extend credit to _____ (Customer Business Name), it is hereby agreed that the undersigned does hereby guaranty to Creditor the prompt, punctual and full payment of all monies now or hereinafter due Creditor from Customer.

Until termination, this guaranty is unlimited as to amount or duration and shall remain in full force and effect notwithstanding any extension, compromise, adjustment, forbearance, waiver, release or discharge of any party obligor or guarantor, or release in whole or in part of any security granted for said indebtedness or compromise or adjustment thereto, and the undersigned waives all notices thereto.

The obligations of the undersigned shall be at the election of Creditor, shall be primary and not necessarily secondary, and Creditor shall not be required to exhaust its remedies as against Customer prior to enforcing its rights under this guaranty against the undersigned.

The guaranty hereunder shall be unconditional and absolute and the undersigned waive all rights of subrogation and set-off until all sums under this guaranty are fully paid. The undersigned further waives all suretyship defenses or defenses in the nature thereof, generally.

In the event payments due under this guaranty are not punctually paid upon demand, then the undersigned shall pay all reasonable costs and attorney's fees necessary for collection, and enforcement of this guaranty.

If there are two or more guarantors to this guaranty, the obligations shall be joint and several and binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives.

The guaranty may be terminated by any guarantor upon fifteen (15) days written notice of termination, mailed certified mail, return receipt requested to the Creditor. Such termination shall extend only to credit extended beyond said fifteen (15) day period and not to prior extended credit, or goods in transit received by Customer beyond said date, or for special orders placed prior to said date notwithstanding date of delivery. Termination of this guaranty by any guarantor shall not impair the continuing guaranty of any remaining guarantors of said termination.

Each of the undersigned warrants and represents it has full authority to enter into this guaranty. This guaranty shall be binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives. This guaranty shall be construed and enforced under the laws of the State of Ohio.

SIGNATURE OF GUARANTOR _____ DATE _____

PRINT NAME OF ABOVE _____

SS# OF GUARANTOR _____ HOME PHONE _____

HOME ADDRESS, CITY, STATE & ZIP _____