

REVILLE WHOLESALERS DISTRIBUTING, INC.

Request for Credit & Open Account

The undersigned hereby requests Reville Wholesale Distributing/Reville Specialty Sales, ("Reville") to extend credit to:

Exact Legal Name of Company: _____
(Hereinafter referred to as "Purchaser").

D.B.A. _____
(Do Not Complete if doing Business Under Legal Name.)

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone Number: _____ Fax Number: _____

Employee Identification No. (E.I.N.) _____

Names of Owners, Partners, and/or Corporate Officers:

1. Name: _____ Title: _____ Home Phone: _____

Home Address: _____ Social Security No. _____

City: _____ State: _____ Zip: _____

2. Name: _____ Title: _____ Home Phone: _____

Home Address: _____ Social Security No. _____

City: _____ State: _____ Zip: _____

3. Name: _____ Title: _____ Home Phone: _____

Home Address: _____ Social Security No. _____

City: _____ State: _____ Zip: _____

Guarantor does hereby agree to all of REVILLE'S credit policies in effect from time to time (a copy of which Guarantor does hereby acknowledge having received) and does hereby authorize REVILLE to conduct such credit investigations as it deems appropriate, including, without limitation, making inquiry of the references listed above and credit reporting agencies. Guarantor authorizes all references listed above and all credit reporting agencies to provide any information requested by REVILLE.

In consideration of REVILLE agreeing to sell merchandise and/or otherwise extend credit to Purchaser (as defined on the reverse side of this document), the undersigned jointly and severally do hereby personally guarantee payment to REVILLE, without prior notice or demand, of all amounts now or hereafter owed to REVILLE by Purchaser from time to time (including service and other charges and interest), including all renewals and extensions of credit granted and regardless of the surrender of security, if any. Furthermore, the undersigned jointly and severally agree to reimburse REVILLE on demand for all costs of collection and attorney's fees in the event that Purchaser does not timely pay REVILLE all amounts owned by Purchaser to REVILLE.

Signed: _____ Date: _____

Guarantor

Signed: _____ Date: _____

Guarantor

Please Complete Both Sides of This Application!

Bank Reference:

Name: _____ Phone No. _____

Address: _____

City: _____ State: _____ Zip: _____

Trade References: (4 Required)

1. Name: _____ Phone No. _____

Address: _____ City: _____ State & Zip _____

2. Name: _____ Phone No. _____

Address: _____ City: _____ State & Zip _____

3. Name: _____ Phone No. _____

Address: _____ State & Zip _____

4. Name: _____ Phone No. _____

Address: _____ State & Zip _____

For your convenience we accept Mastercard and Visa. Please complete the following to have your payment charged to your credit card.

Cardholder Name: _____

Cardholder Address: _____

Cardholder City: _____ State: _____ Zip: _____

MC/ VISA #: _____ Exp Date: _____ Security #: _____

Cardholder Signature: _____

Please Complete Both Sides of This Application!