

Credit Application

Customer Name _____ Phone _____

Mailing Address _____ City _____ State ____ Zip _____

Shipping Address _____ City _____ State ____ Zip ____

Date Established _____ At Present Location Since _____

() Corporation () Partnership () Sole Proprietorship () Other: Specify _____

Date formed _____ Under What State _____

Names of Owners, Officers, or Partners:

Name _____ Title _____ Social Security _____

Name _____ Title _____ Social Security _____

Name _____ Title _____ Social Security _____

Name _____ Title _____ Social Security _____

State Sales Tax # _____ Resale # _____

Issued By What State ____

Have Any of the Above Principals Ever Had A Business Failure or Filed Bankruptcy?

() YES () NO If Yes, Describe Fully On A Separate Page.

Describe Your Business Operation _____

Your Sales Area _____ Total Number of Employees ____

Is Your Business Location: () Owned () Leased

Name of Landlord _____ Phone _____

Address _____ City _____ State ____ Zip _____

Name of Bank _____ Phone _____

Address _____ City _____ State ____ Zip _____

Savings Account Number ____

Name of Bank _____ Phone _____

Address _____ City _____ State ____ Zip _____

Checking Account Number _____ (OVER)

References:

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip Name

_____ Phone _____

Address _____ City _____ State _____ Zip Name

_____ Phone _____

Address _____ City _____ State _____ Zip

THE ABOVE INFORMATION IS SUBMITTED FOR THE PURPOSE OF OBTAINING CREDIT. THE UNDERSIGNED AUTHORIZES YOU TO MAKE SUCH INQUIRIES AS ARE NECESSARY TO OBTAIN CREDIT INFORMATION AND AUTHORIZES MY BANK AND/OR SUPPLIERS TO RELEASE INFORMATION REGARDING MY ACCOUNT(S). IN CONSIDERATION FOR THE EXTENSION OF CREDIT, I/WE AGREE TO PAY A LATE CHARGE OF 1.5% PER MONTH, A TRUE ANNUAL RATE OF 18% PER ANNUM ON ANY AMOUNTS PAST DUE 30 DAYS (AFTER BILLING OR RECEIPT OF INVOICE). I/WE FURTHER AGREE THAT UPON DEMAND I/WE SHALL PERSONALLY PAY ALL AMOUNTS OWING BY SAID BUSINESS TO LAKESIDE POULTRY RANCH, INC. IN THE EVENT IT BECOMES NECESSARY FOR YOUR COMPANY TO INCUR ANY COLLECTION COSTS OR SUITS TO COLLECT THIS AGREEMENT, THE UNDERSIGNED PROMISES TO PAY SUCH ADDITIONAL COSTS OF COLLECTION AND ALL REASONABLE ATTORNEY'S FEES AND COSTS.

CONTINUING GUARANTY AGREEMENT

IN CONSIDERATION OF THE EXTENSION OF CREDIT, THE UNDERSIGNED GUARANTOR(S), JOINTLY AND SEVERALLY, UNCONDITIONALLY GUARANTEE AND PROMISE TO PAY TO LAKESIDE POULTRY RANCH, INC., OR ITS ASSIGNS, ANY INDEBTEDNESS INCURRED ON OR AFTER _____, 20____, BY THAT CERTAIN BUSINESS KNOWN AS _____, BY REASON OF THE PURCHASE OF MERCHANDISE FROM LAKESIDE POULTRY RANCH, INC. GUARANTORS) UNDERSTAND AND AGREE THAT THIS IS A CONTINUING AND UNCONDITIONAL GUARANTY AS TO ANY AND ALL DEBT INCURRED ON OPEN BOOK ACCOUNT FOR GOODS SOLD AND DELIVERED TO SAID BUSINESS. UNTIL REVOKED BY WRITTEN NOTICE DELIVERED TO LAKESIDE POULTRY RANCH, INC., AT P.O. BOX 1258, LAKESIDE, CA 92040, THIS GUARANTY SHALL COVER ALL FUTURE INDEBTEDNESS ARISING UNDER SUCCESSIVE TRANSACTION THAT EITHER SHALL CONTINUE THE LIABILITY SAID BUSINESS OR FROM TIME TO TIME RENEW IT AFTER IT HAS BEEN SATISFIED. THIS GUARANTY IS EFFECTIVE REGARDLESS OF THE LEGAL FORM OF SAID BUSINESS, WHETHER DISCLOSED OR UNDISCLOSED, AND ANY TERMINATION OF THIS GUARANTEE SHALL BE EFFECTIVE ONLY AS TO INDEBTEDNESS INCURRED AFTER DELIVERY OF NOTICE OF TERMINATION.

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

Client Release Authorization Form

For use of Consumer Credit Reports

Last Name Signature _____ First _____ MI ____

Home Address _____ City _____ State _____ Zip _____

S.S.# _____ Date of Birth _____

Joint Spouse Report:

Last Name Signature _____ First _____ MI ____

Home Address _____ City _____ State _____ Zip _____

S.S.# _____ Date of Birth _____

The undersigned hereby consent(s) to _____ use of a non business consumer credit report on the undersigned in order to further evaluate the creditworthiness of the undersigned as principal(s) proprietor(s) and/or guarantor(s) in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorize(s) _____ to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by this credit application. The undersigned as (an) individual(s) hereby knowingly consent(s) to the use of such credit report consistent with the Federal Fair Credit Reporting Act as Contained in 15 U.A.C. a 1681 et seq.

Dated: _____

Signature

Dated: _____

Signature