



412 N. Tremont Street  
 P.O. Box 22248  
 Indianapolis, IN 46222-0248

Date: \_\_\_\_\_

**CREDIT APPLICATION -- AGREEMENT -- GUARANTY**

The undersigned customer, \_\_\_\_\_ ("Customer"), and Guarantor(s), hereby request(s) **Acoustic Supply, Inc. ("Acoustic")**, an Indiana corporation, to extend credit to Customer. To facilitate Acoustic's extension of credit to Customer and in consideration thereof, Customer and Guarantor(s) make the following representations, promises and guarantees:

**CUSTOMER INFORMATION**

1. Legal Name of Company: \_\_\_\_\_  
 Doing Business As (DBA): \_\_\_\_\_  
 Full Street Address: \_\_\_\_\_  
 Full Billing Address: \_\_\_\_\_
  
2. Telephone Number(s): (\_\_\_\_) \_\_\_\_\_ Fax Number:(\_\_\_\_) \_\_\_\_\_
  
3. Principal Contact(s): \_\_\_\_\_  
 Accounts Payable Contact: \_\_\_\_\_
  
4. Entity Type (check one):  Corporation  Sole Proprietorship  Partnership  
 Other, specify: \_\_\_\_\_
  
5. Federal Tax Identification Number or Social Security Number: \_\_\_\_\_
  
6. Primary Business Activity: \_\_\_\_\_
  
7. No. of Years in Business: \_\_\_\_\_ No. of Years Under Current Owners: \_\_\_\_\_
  
8. Shareholders/Owners: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
9. Officers & Titles: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Acoustic Supply, Inc.**  
**CREDIT APPLICATION -- AGREEMENT -- GUARANTY, page two**

**10. Bank Information:**

Bank Name: \_\_\_\_\_ Account No.: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Telephone No.: (\_\_\_\_) \_\_\_\_\_  
Types of Accounts: \_\_\_\_\_

**11. Trade Credit References:**

**1.) Company Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Account No.: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_

**2.) Company Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Account No.: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_

**3.) Company Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Account No.: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_

The Customer hereby authorizes Acoustic Supply, Inc. to contact and investigate the references listed above, including the banks, and hereby authorizes the references to release requested information to Acoustic Supply, Inc..

**12. Tax Exempt?** \_\_\_\_Yes \_\_\_\_No If yes, tax exemption certificate **MUST** be included.

**13. Level of Business:**

Amount of Anticipated First Order: \$ \_\_\_\_\_  
Amount of Credit Line Requested: \$ \_\_\_\_\_

**Acoustic Supply, Inc.**  
**CREDIT APPLICATION -- AGREEMENT -- GUARANTY, page three**

The above information is being submitted for the purpose of allowing Acoustic Supply, Inc. to assess credit solely for business purposes of the Customer. The Customer hereby represents and warrants that the information contained herein, or submitted in connection herewith, is true and complete as of the date hereof. If Acoustic extends credit to Customer, Customer promises and agrees to pay to Acoustic the full invoice amount of all credit extended within the terms specified on the face of each invoice. If full payment is not made within said period, then the unpaid balance of the invoice will be past due and Customer also agrees to pay monthly interest/late charges on all past due balances at the rate of eighteen percent (18%) per annum (1.5% per month) until the account is paid in full. If the account is placed for collection, Customer also agrees to pay all costs and expenses incurred by Acoustic in the collection of any amounts due by Customer to Acoustic, including court costs and reasonable attorney fees. To secure payment of any and all amounts of credit extended to Customer, in addition to all other security which Customer may provide, Customer grants to Acoustic a security interest in and to all materials delivered to Customer by Acoustic and in and to all receivables and proceeds thereof (the "Collateral"), all without relief from valuation and appraisal laws and with reasonable attorneys' fees and all costs of collection. Customer authorizes Acoustic to file financing and continuation statements, and amendments and supplements thereto, relating to the Collateral, signed only by Acoustic. In the event any amount owed by Customer is past due, Acoustic may, at its option and without notice to Customer or Guarantor(s), declare all obligations of Customer to be immediately due and payable, with all remedies allowed by law.

**SIGNATURE** (Must be signed by a duly authorized officer)

By: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Company/Customer Full Legal Name: \_\_\_\_\_

**PERSONAL GUARANTY:**

The undersigned Guarantor(s) each hereby jointly and severally guarantee full and timely payment of all amounts due by Customer to Acoustic, including without limitation all invoiced amounts, interest/late charges, attorney fees and costs of collection.

**GUARANTOR(S):**

By: \_\_\_\_\_

Printed: \_\_\_\_\_

By: \_\_\_\_\_

Printed: \_\_\_\_\_

ATTEST / WITNESS:

By: \_\_\_\_\_

Printed: \_\_\_\_\_

Title: \_\_\_\_\_



412 N. Tremont Street  
P.O. Box 22248  
Indianapolis, IN 46222-0248

Customer Name and Address:

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Dear Valued Customer,

Effective as of April 1<sup>st</sup>, 2006 we began sending all invoices to our customers by either email or fax. As of that date we no longer mailed out invoices. Please fill out the fields below and fax this form back to us at (317) 872-8110 to indicate how you want to receive your invoices.

Thank you for your understanding and cooperation. And thank you for your business.

Sincerely,

*Ken Reinhart*

Ken Reinhart  
Controller

Send our invoices to us by the method checked below:

\_\_\_\_\_ Send invoices via email to: \_\_\_\_\_  
(email address)

\_\_\_\_\_ Send invoices via fax to: \_\_\_\_\_  
(fax number)

\_\_\_\_\_

(Signature)

\_\_\_\_\_

(Date)