



ASIDACO LLC
400 Linden Avenue
Dayton, OH 45403
Phone: (937) 234-7944
: (800) 204-7944

New Customer Account Setup

Date: _____

CLIENT CONTACT: _____ APPLICANT NAME: _____

PHONE: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

BILLING ADDRESS (IF DIFFERENT FROM ABOVE):

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ CREDIT LINE DESIRED: _____

COMPANY IS A: CORPORATION, PARTNERSHIP, PROPRIETORSHIP, L.L.C., P.L.C.

TAX EXEMPT? (Y) (N) IF YES, ATTACH TAX EXEMPT CERTIFICATE

CORPORATE REGISTRATION NO. _____

TAX ID NO. _____

ANNUAL SALES _____

#YEARS IN BUSINESS _____ STATE OF INCORPORATION _____

BONDING COMPANY: _____ CONTACT NAME: _____

PHONE: _____

INSURANCE, COMPANY: _____ CONTACT NAME: _____

COMPANY OFFICERS

NAME 1: _____ TITLE: _____

ADDRESS: _____ PHONE: _____

SSN/TAX ID NO.: _____

NAME 2: _____ TITLE: _____

ADDRESS: _____ PHONE: _____

SSN/TAX ID NO.: _____

BANK NAME: _____ ACCOUNT #: _____

BRANCH ADDRESS: _____ CITY/STATE/ZIP: _____

BANK CONTACT NAME: _____ PHONE: _____

BANKING REFERENCE

VENDOR 1: _____ CONTACT: _____

LINE OF CREDIT Y, N LIMIT \$ _____

PAYMENT ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE: _____ FAX: _____ ACCOUNT #: _____

HIGHEST CREDIT LIMIT: _____ YEARS ASSOCIATED: _____

VENDOR 2: _____ CONTACT: _____

LINE OF CREDIT Y, N LIMIT \$ _____

PAYMENT ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE: _____ FAX: _____ ACCOUNT #: _____

HIGHEST CREDIT LIMIT: _____ YEARS ASSOCIATED: _____

VENDOR 3: _____ CONTACT: _____

PAYMENT ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE: _____ FAX: _____ ACCOUNT #: _____

HIGHEST CREDIT LIMIT: _____ YEARS ASSOCIATED: _____



No work will be done until credit application is completed, approved, and the customer is notified.

FINANCIAL INFORMATION

In consideration of the extension of credit by ASIDACO of Dayton, L.L.C. (Creditor) to you, ("you" or the "Debtor"), you agree to the following:

Credit Terms: All invoices are due upon receipt and no more than three days (3) days from the date of invoice. After one hundred twenty (120) days of satisfactory payment history terms are net thirty(30) days from the date of invoice. Past due invoices incur finance charges at the rate of 2.0% per month, 24% per annum. Discount terms, if applicable, are strictly enforced. Sixty (60) day past due accounts will automatically become C.O.D. A minimum charge of \$50.00 will be added to any dishonored check or instrument, in addition to any other interest charges.

You agree to pay the reasonable attorney's fees and other expenses incurred by the Creditor in collecting any amounts due hereunder, in addition to all other amounts owed. Any suit between the parties shall be governed by the laws of the State of Ohio and shall be brought exclusively in the courts of the Ohio County from which the material or labor was shipped or purchased. If the suit involves materials OR labor shipped from multiple Ohio counties, suit may be brought in any one of the said counties . The undersigned applicant further consents to both personal jurisdiction and venue in said court. The undersigned applicant also waives the right to demand a jury in any action between the parties to this agreement.

Termination: You acknowledge the right of the Creditor to refuse to extend you additional credit at any time, in the Creditor's sole discretion and without prior notice. **Change of Status:** The Debtor understands that it must notify the Creditor in writing of any change of ownership, the name of or the structure or nature of the Debtor's business, or the merger, sale, acquisition or dissolution of the Debtor. The Debtor represents and warrants that all statements contained in this Customer Terms and Conditions are true and correct and grants permission for the Creditor to contact any customer or creditor of the Debtor and for such customer or creditor to furnish to the Creditor any and all information which may be requested in consideration of credit. This consent shall survive throughout the entire term that the Debtor purchases material from the Creditor. The Debtor releases and holds Mechanical Systems of Dayton, Inc. or any or all of its Subsidiaries harmless from liability for obtaining and using this information. The Debtor authorizes the Creditor to release its credit information to other suppliers, as required. The Creditor will consider this as a continuing statement of the Debtor's financial position and situation until notified otherwise by the Debtor. All representation and warranties shall be deemed repeated and reaffirmed as true and correct by the Debtor at the time of each purchase.

Security: In order to secure the extension of credit under this Agreement and any and all other sums, amounts and/or obligations due and owing from the Debtor to the Creditor (collectively, "Obligations"), the Debtor agrees to have the Personal Guaranty set forth above signed by a principal of the Debtor and delivered to the Creditor upon delivery of this Agreement and the Credit Application.



Client Initial

Miscellaneous: The agreement between the Creditor and the Debtor and Guarantor(s) relating to the extension of credit by the Creditor shall be governed by Ohio law and constitutes the entire agreement between the parties with respect to its subject matter, and supersedes all prior oral or written agreements, and can only be modified with the written consent of all parties. To the extent any portion of this Agreement is invalid or contrary to any existing or future law, such portion is deemed severed from the Agreement and the balance of the Agreement is not affected and remains in full force and effect. The undersigned represents and warrants that he/she has all the requisite power and authority to sign on behalf of the Debtor and that this is the legally binding obligation of the Debtor, enforceable in accordance with its terms. Applications submitted via facsimile, scan, email or other electronic means are considered original.

Debtor's signature acknowledges and accepts without reservation the financial responsibility, authority, ability and willingness to pay in accordance with the terms and conditions set forth above. Client hereby authorizes ASIDACO to contact the above creditors and banks to consider the extension of credit.

COMPANY NAME: _____

SIGNATURE: _____ PRINTED NAME: _____

INITIAL _____

TITLE: _____ DATE: _____

