



MICHIGAN PNEUMATIC TOOL, Inc.

10650 Cloverdale • P.O. Box 04950 • Detroit, MI 48204-0950

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www.michiganpneumatic.com • e-mail: mpt@michiganpneumatic.com

Commercial Credit Application

Date	DUNS Number	Purchase Order Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Taxable? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Tax Exempt, enter Tax Exempt number (certificate copy must be attached)
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Company Information

Full Legal Business Name	Billing Phone Number ()	E-mail Address	
DBA or AKA	Billing Fax Number ()	Shipping Phone Number ()	Shipping Fax Number ()
Billing Address	City	State	Zip Code
Shipping Address	City	State	Zip Code

Business Credit Information

Name of Principal(s), Authorized Officer(s) or Owner(s) 1.	Title(s)	Home Address	Phone Number ()
2.			Phone Number ()
3.			Phone Number ()
Name of Person Responsible for Paying Invoices	Title	Phone Number ()	Number of Employees
Type of Business			
Taxpayer ID Number	In Business Since	Number of Locations	Estimated Annual Sales
Names of Persons Authorized to Make Purchases			
Company Type (check one) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other (please specify)			

Trade & Bank References (please supply companies which are well rated with Dun & Bradstreet)

Trade Reference Name	Contact	Phone Number ()	Fax Number ()
Address	City	State	Zip Code
Trade Reference Name	Contact	Phone Number ()	Fax Number ()
Address	City	State	Zip Code
Trade Reference Name	Contact	Phone Number ()	Fax Number ()
Address	City	State	Zip Code
Bank Name	Phone Number ()	Fax Number ()	Contact
Checking Account Number			
Bank Address	City	State	Zip
Savings Account Number			

For faster processing of your application, please fill out all information where required. Your assistance will be greatly appreciated. Please enclose your latest year end financial statement and interim statements if possible.

Guaranty Agreement

In consideration of the extension of credit, granted by Michigan Pneumatic Tool, Inc. ("Seller"), the undersigned does hereby unconditionally guaranty payment of whatever amount the Credit Applicant, named above, shall at any time owe to Seller on account of goods and materials hereafter delivered, furnished or supplied, whether said indebtedness is in the form of notes, bills or open account. This shall be an open and continuing guaranty, and shall continue in force notwithstanding any change in the form of such indebtedness, or renewals of extensions granted by Seller, without obtaining any consent thereto, and until expressly revoked by written notice from me to you, and any such revocation shall not, in any manner, affect my liability as to any indebtedness contracted for prior thereto. The undersigned Guarantor further agrees to pay all expenses, including court costs, attorney's fees paid or incurred by the Seller in collection of any or all amounts owed them by the Credit Applicant or in enforcing this Guaranty Agreement.

This guaranty shall be a continuing, absolute and unconditional guaranty, and shall be enforceable by Seller, its successor or assigns. All diligence in collection or protection, and all presentment, demand, protest, and/or notice of dishonor, default, nonpayment, or of the creation and existence of any and all guaranteed debts, and of any and all extensions of credit and indulgence hereunder, are expressly waived. The liability of the undersigned Guarantor(s) shall be joint and several. Payment from the Guarantor of monies due and owing as a result of this Guaranty Agreement shall be due upon demand by Seller.

The undersigned represents and warrants that all of the information provided in this Commercial Credit Application is true and accurate and that Seller may rely upon it in deciding to grant credit.

If this credit application is approved, I agree to your terms of Net 30 Days. A finance charge of 1-1/2% per month, 18% per annum, will be added on past due invoices.

Print Name: _____ Print Name: _____

Address: _____ Address: _____

Sign Individually: _____ Sign Individually: _____

Date: _____ Date: _____