



261 South Main Street, Cattaraugus, NY 14719

Attn: Ron Wasmund, Controller Ph: 716.257.3451 Fax: 716.257.9818

CREDIT APPLICATION (complete and return by mail or fax to above address)

The undersigned company (hereinafter referred to as "Applicant") is applying for credit with Setterstix and agrees to abide by the terms and conditions below.

APPLICANT NAME: _____ DBA: _____

CONTACT PERSON: _____ TITLE: _____

ADDRESS: _____

PHONE: _____ FAX: _____

FEDERAL TAX ID #: _____ NO. OF EMPLOYEES: _____

TYPE OF BUSINESS: _____ DATE ESTABLISHED: _____

AMOUNT OF CREDIT REQUESTED: _____ PURCH. ORD. REQUIRED: () YES () NO

ARE YOU TAX EXEMPT? () YES () NO

HAVE YOU EVER HAD CREDIT WITH US BEFORE? () YES () NO IF YES, UNDER WHAT NAME? _____

ARE YOU **A CORPORATION** () YES () NO IF YES, STATE OF INCORPORATION: _____

NAMES AND ADDRESSES OF YOUR 3 CHIEF CORPORATE OFFICERS: _____

ARE YOU **A PARTNERSHIP**? () YES () NO IF YES, PLEASE LIST NAMES OF ALL PARTNERS: _____

ARE YOU **A SOLE PROPRIETORSHIP**? () YES () NO

TRADE REFERENCES:

REFERENCE #1:

Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____

REFERENCE #2:

Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____

REFERENCE #3:

Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____

(Continue to the next page)

The Applicant represents that the above information is true and is given to induce Setterstix Inc. ("Setterstix" or "us") to extend credit to the Applicant. The Applicant authorizes Setterstix to make such credit investigation as Setterstix sees fit, including contacting the above trade references and obtaining credit reports. The Applicant authorizes all trade references, banks and credit reporting agencies to disclose to Setterstix any and all information concerning the financial and credit history of the Applicant.

The undersigned has read the General Terms and Conditions and agrees to comply with all of their provisions.

APPLICANT:

AUTHORIZED SIGNATURE: _____

PRINTED NAME: _____

TITLE: _____ DATE: _____

GENERAL TERMS AND CONDITIONS:

1. Invoices. Typically, invoices are mailed the day after the shipment of goods. All bills become payable immediately and if not paid within the terms set forth on the bill are considered past due.
2. Late Charges. A service charge of 2% per month (or the maximum rate permissible by law, if lower) will be added to all amounts billed if not paid in accordance with terms. All costs and expenses incurred in connection with the collection of overdue payments, including legal fees and disbursements, shall be payable by the Applicant.
3. Suspension and Termination of Credit. No additional credit will be extended to past due accounts unless arrangements satisfactory to Setterstix are made with our credit department. If an account is past due for more than thirty (30) days, Setterstix may terminate any credit and require payment in advance.
4. Prices and Delivery. Unless specified otherwise by us in writing, prices are F.O.B. (as defined by New York law) Setterstix's factory. Setterstix shall not be responsible for any other costs and expenses in connection with the transportation from the point of origin to the address indicated by you (the "Purchaser's Site"), including without limitation, transport insurance and charges incurred at the point of destination such as any costs of storage, unpacking, assembly, installation or any other work, services or expenses performed or incurred at Purchaser's Site. In any case, the risk of loss and damage shall pass over to you once the goods have been put into the possession of the carrier at the point of origin.
5. Other Terms. All orders shall be subject to the General Terms and Conditions of Setterstix, as in effect from time to time. The current version is available at Setterstix's website, www.setterstix.com.

Please continue to next page for Bank Reference Information and note, both Credit Application and Bank Reference Form require Applicant's signature, title and date.

REQUEST FOR BANK CREDIT INFORMATION

Please provide bank credit information on the account below. This information is requested for use in the extension of credit for business purposes only and will be held in strict confidence. The below Applicant has signed to authorize the release of this information.

BANK REFERENCE: (Bank from which Applicant authorizes Setterstix Inc. to receive credit information)

TO: _____ FROM: _____
NAME OF BANK: _____ APPLICANT COMPANY NAME: _____
ACCOUNT #: _____ ADDRESS: _____
ADDRESS: _____ PHONE: _____ FAX: _____
PHONE: _____ FAX: _____ CONTACT PERSON: _____
CONTACT PERSON: _____

The purpose of this inquiry is to provide Setterstix Inc. sufficient banking information to permit establishing an "open" line of credit for the above applicant in the estimated amount of \$ _____ for either a new order/account or to increase an existing line of credit.

As a duly authorized representative of the above applicant, my Company and I authorize Setterstix to make such credit investigation as Setterstix sees fit, including contacting the above Bank and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to Setterstix any and all information concerning the financial and credit history of my company.

AUTHORIZED SIGNATURE: _____ DATE: _____
PRINTED NAME: _____ TITLE: _____

BANK TO COMPLETE THIS SECTION

Our experience with the Applicant has been:

Depository accounts: Date(s) opened _____ Average Balances _____
If closed, when? _____
Aggregate balances used? _____ YES _____ NO
Experience and comments: _____

LOAN ACCOMMODATIONS: Describe, including length of borrowing relationship, high credit, types of loan accommodations (line of credit, term loan, mortgage, installment, etc.) amount outstanding, amount past due (if any), collateral, guarantees and endorsements (if any): _____

LOAN EXPERIENCE/COMMENTS: _____

FINANCIAL STATEMENT: Date: _____ Period Covered: _____ Audited () yes () no

MANUAL SIGNATURE OF BANKER: _____
PRINT OR TYPE NAME OF BANKER: _____
BANKER'S TITLE: _____ DATE: _____

BANK TO RETURN TO: SETTERSTIX INC., 261 S. MAIN STREET, CATTARAUGUS, NY 14719
ATTN: RON WASMUND, CONTROLLER PH:716.257.3451 FAX:716.257.9818