

CREDIT APPLICATION

A. C. KREBS COMPANY

4000 Crittenden Drive ■ Louisville, Kentucky 40209 ■ Telephone (502) 367-6431 ■ FAX (502) 367-6469

NAME:	DATE:					
DBA:						
ADDRESS:			_			
CITY:						
TELEPHONE:						
INDIVIDUAL OWNED:					_	
WHOM DID YOU SUCCEED: KIND OF BUSINESS:						
YEARS IN BUSINESS:						
IS YOUR COMPANY TAX EXEMPT?						
		**please send certificate				
OFFICERS: PRESIDENT:		S.S	·			
VICE PRES:		S.S	•			
SEC:		S.S				
TREA:		S.S				
NAME OF OWNERS/PARTNERS:						
REFERENCES: BANK:		BAN	IK OFFICER:_			
ADDRESS:						
BANK ACCT:						
**PLEASE LIST FOUR (4) TRADE	REFERENCES					
TELEPHONE NAME		ADDRESS	CITY	STATE	ZIP	



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GUARANTEE AGREEMENT

Date:	
I,, residing	at
(Name of Person)	
, for an (Address, City, State, Zip Code)	d
in consideration of your extending credit at my request to:	
(Name of Company)	_
(here in after referred to as the "Company"), of which I am	_;
(Title)	
hereby personally guarantee to you the payment at A. C. Krebs Company, 4000	
<u>Crittenden Drive, Louisville in the State of Kentucky</u> of any obligation of the Company	
and I hereby agree to bind myself to pay you on demand any sum which may become due	
to you by the Company whenever the Company shall fail to pay the same. It is	
understood that this guaranty shall be a continuing and irrevocable guaranty and	
indemnity for such indebtedness of the Company. I do hereby waive notice of default,	
non-payment and notice thereof and consent to any modification or renewal of the credit	
agreement hereby guaranteed.	
I hereby agree that all payments are due by the 10th of the following month of	
shipment. A carrying charge of 1-1/2% Per Month will be added to all	
(initial)	
balances over 30 days old (18% annually).	
In the event it becomes necessary for A. C. Krebs Co., Inc. or any of its affiliates,	
to incur any collection costs or suits to collect under this agreement, the undersigned	
promised to pay such additional costs of collection and such sum as the court may	
adjudge reasonable as attorney's fees on said suit. This shall be a continuing guarantee	
which shall expire on the day of, 20, and shall	
not exceed in amount the sum of \$, exclusive of interests, court costs, and/or attorney's fees.	
and/or attorney's rees.	
Signature	
Social Security Number	
Witness:	
Address:	