

PERSONAL GUARANTEE

For value received, receipt of which is hereby acknowledged, in order to induce Epting Distributors, Inc. to extend credit to

I/we hereby guarantee according to its terms the payment of any account due or to become due by said company to Epting Distributors, Inc., including attorney's fees incurred, if any, for the collection of such account. I/we have read and understand the terms and general conditions for the account. I/we agree to be bound by the same terms and conditions. This guarantee shall include past due balances, current balances and further sales and credit hereafter extended and fees hereafter incurred. This guarantee shall remain in full force and effect until revocation of the same is received in writing by registered mail-return receipt. Any revocation notice must be sent to Credit Department, Epting Distributors, Inc., 300 Industrial Dr., Lexington, SC 29072. Revocation of this guarantee does not relieve obligation to pay balances owed whether past due or current and whether or not demand for same has been made.

Executed at _____,
this _____ Day of _____, 20 ____.

Individually and as Guarantor

Signature

Individually and as Guarantor

Signature

WWW.EPTINGDIST.COM



BRANCH LOCATIONS

Anderson
Augusta
Charleston
Charlotte
Columbia
Conway
Goldsboro
Raleigh
Savannah
Spartanburg

CENTRAL
DISTRIBUTION
CENTER:
Lexington, SC

WWW.EPTINGDIST.COM
1-800-826-0208
Fax: 803-356-4680



Credit APPLICATION

Thorough completion of the information requested will expedite the processing of your credit application. Please have an owner, officer or authorized agent of your company sign the application where indicated. Return the completed and signed application to Epting Distributors, Inc.

Applicant authorizes Epting Distributors, Inc. to check all credit references and information provided and to utilize all other credit resources including consumer reports, deemed necessary by Epting Distributors, Inc. to determine the applicant's creditworthiness.

BUSINESS & PERSONAL INFORMATION

Legal Name of Business

Trade Name

Address

City

County

State

Zip

Telephone

Fax

Type of Ownership:

Limited Liability Corporation

Corporation

Proprietorship

Partnership

Date Business Started _____

Principal Owner(s) or Officer(s) Are:

Name _____

Resident Address _____

Title _____

Social Security No. _____

Name _____

Resident Address _____

Title _____

Social Security No. _____

Annual Sales \$ _____ No. of Employees _____

No. of Trucks _____ Works from Home Shop

Describe type of business and work performed:

If new business, list employer(s) and address(es) for past two years: _____

List other business interests now of Owner(s) or Officer(s):

Estimated Amount of Credit Needed Monthly:

\$ _____

If sales tax exempt, attach certificate.

CREDIT REFERENCES

Bank _____

Name _____

Address _____

Telephone _____

Supplier _____

Name _____

Address _____

Telephone _____

Supplier _____

Name _____

Address _____

Telephone _____

Supplier _____

Name _____

Address _____

Telephone _____

REAL ESTATE OWNED

Home

Value \$ _____

Title in Name of: _____

Balance Owing \$ _____

Mortgage Holder _____

Address _____

Business

Value \$ _____

Title in Name of: _____

Balance Owing \$ _____

Mortgage Holder _____

Address _____

Other

Value \$ _____

Title in Name of: _____

Balance Owing \$ _____

TERMS & CONDITIONS

All references to Creditor herein shall mean Epting Distributors, Inc. or its successors. The creditor's month ends on the 25th. Any purchases made from the 26th to the end of the month will be considered next month's purchases when determining due dates.

All invoices are due and payable on the 10th of the month following date of purchase.

A service charge of 1 1/2% (18%) annually will be charged on invoices for which payment has not been received or postmarked on or before the 25th of the month following date of purchase.

Any payments received will be applied toward service charges first and the oldest invoices next.

General Conditions

The information given is offered as a request of the application for an extension of credit for commercial business use only. I/we authorize creditor to make inquiry into any and all matters set forth in this application, to obtain oral or written credit reports from any credit reporting agency, in gathering information necessary for the evaluation of my/our credit and financial responsibility. I/we further authorize the within stated references to release to creditor any information concerning the financial status of each of us individually or of our business, partnership or corporation.

In making this application for commercial credit, I/we understand that all past due accounts will be charged interest in the amount stated on the account. Acknowledging that any extension of credit to be adequate consideration, I/we waive the right of exemption under the constitution and Law of the United States and the state in which I/we reside or do business, and I/we agree to pay in addition to the total amount due, reasonable fees for costs of collection including attorney's fees if my/our obligations to creditor are not paid within stated terms and third party or legal action is instituted.

Governing Law and Consent to Jurisdiction

This account and obligations of the undersigned shall be governed by and construed in accordance with the laws of the State of South Carolina. For purposes of any proceedings involving this account or any of the obligations of the undersigned, the undersigned hereby agrees that any suit or action will be instituted only in a non-jury proceeding in a state court in Lexington County, South Carolina. The undersigned consents to the personal jurisdiction of any state court in Lexington County, South Carolina and waives any right to a jury trial.

In the event of any claim by the undersigned against Epting Distributors, Inc., it is agreed that Epting Distributors, Inc. shall not be liable for any consequential or punitive damages or claims for loss of profits.

Authorized Signature