



AN IMS COMPANY

CREDIT APPLICATION PURCHASE AGREEMENT

Attn: Credit Dept. Phone (800) 367-0210 Fax (802) 752-3186

For completing electronically, Word to View/Print Layout

Form with fields: BUSINESS NAME, TELEPHONE NUMBER, STREET ADDRESS, FAX NUMBER, CITY, STATE, ZIP, IN BUSINESS SINCE, # EMPLOYEES, # SALES REPS, MAILING ADDRESS IF DIFFERENT FROM ABOVE, TYPE OF ORGANIZATION (Sole Proprietorship, Partnership, Corporation, Subsidiary), PRIMARY BUSINESS, ESTIMATED ANNUAL PURCHASES, MONTHLY CREDIT LINE REQUESTED, PRINCIPAL OWNER/OFFICER NAME, TITLE, ADDRESS, TRADE REFERENCES, CONTACT INFORMATION (FAX OR EMAIL), ACCOUNTS PAYABLE CONTACT AND PHONE NUMBER, ACCOUNT PAYABLE EMAIL ADDRESS.

CREDIT APPLICATION TERMS & CONDITIONS

- 1. Our Corporate Credit Policy prohibits us from shipping on "Open Account" for new customers until our credit investigation has been completed... 2. The undersigned hereby agrees that all amounts due for goods and services purchased from seller are payable to seller within 30 days from date of invoice. 3. The undersigned hereby agrees to pay service charges on accounts over 30 days old. 4. The undersigned hereby agrees to pay, in the event his/her account becomes delinquent... 5. The undersigned authorizes Bertek Systems to conduct a credit investigation... 6. The undersigned must be an authorized signature for the above applicant.

Form with fields: BANKING REFERENCE (NAME, ADDRESS, TELEPHONE, ACCOUNT NUMBER), CHECKING:, WHAT BEST DESCRIBES YOUR BUSINESS? (MANUFACTURER, WHOLESALER, DISTRIBUTOR, RETAILER, AGRICULTURAL, MULTIPLE - MARK ALL THAT APPLY), DO YOUR PURCHASES QUALIFY FOR ANY SALES TAX EXEMPTIONS?, IS FIRST ORDER ATTACHED?, PRINT NAME, DATE.

AUTHORIZED SIGNATURE (SEE OPTIONS AT RIGHT)

- AUTHORIZED SIGNATURE OPTIONS: 1. PRINT/SIGN/FAX, 2. PRINT/SIGN/SCAN/EMAIL, 3. INSERT DIGITAL SIGNATURE/EMAIL