Credit Application and Personal Guarantee

BILLING/SHIPPING INFORMATION

OFFICIAL COMPANY NAME _____

SHIP TO _____

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

E-MAIL _____

WEBSITE _____

BUSINESS INFORMATION

CHECK ONE ○ CORPORATION ○ PARTNERSHIP ○ PROPRIETORSHIP ○ SUBSIDIARY

YEARS IN OPERATION _____ TYPE OF BUSINESS _____

SALES TAX EXEMPTION # _____ SALES PER YEAR _____

PRESIDENT / CEO _____ TREASURER / CONTROLLER _____

VP / FINANCE _____ A/P MANAGER _____

PRINCIPAL(S) / OWNER(S)

NAME _____ SOCIAL SECURITY NUMBER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____

BANK REFERENCE

NAME OF BANK _____   ACCOUNT NUMBER _____

BANK ADDRESS _____

CITY _____   STATE _____   ZIP _____

PHONE _____   FAX _____

BANK CONTACT _____

TRADE REFERENCES

COMPANY NAME _____   CONTACT _____

ADDRESS _____

CITY _____   STATE _____   ZIP _____

PHONE _____   FAX _____

COMPANY NAME _____   CONTACT _____

ADDRESS _____

CITY _____   STATE _____   ZIP _____

PHONE _____   FAX _____

COMPANY NAME _____   CONTACT _____

ADDRESS _____

CITY _____   STATE _____   ZIP _____

PHONE _____   FAX _____

I, _____ release the opportunity for Missouri Mulch to access my credit history from my
trade vendors and my bank account info to establish an open line of credit with them.

Signature _____

By signing this credit application/agreement, the individual executing this Application below on behalf of Buyer,
individually and personally, represents and warrants to The Missouri Mulch Company, Inc that:
1) he/she is authorized to execute this Application on behalf of Buyer; 2) the information set forth in this
Application is accurate and complete; 3) Buyer agrees that the prevailing party in any proceeding to enforce
this Guarantee or to resolve a dispute with The Missouri Mulch Company, Inc will be entitled to recover its costs,

including attorneys' fees, collection agency fee, from the other party; and 4) any legal action brought by Buyer will be in the jurisdiction of [_____], and Buyer hereby submits to the jurisdiction of said courts. The laws of the State of Missouri will apply. Buyer agrees to pay interest on any unpaid purchases, beginning 30 days after the payment due date, at the rate of 1.5% per month; 18% per annum, or the maximum judicial rate, whichever is less.

In signing this Application, Buyer agrees to all of the above and hereby grants permission for credit information to be verified by company(ies) and financial institution(s) that the Buyer has specified on this document and others that The Missouri Mulch Company, Inc becomes aware of during the credit review process and from time to time. The undersigned also understands that The Missouri Mulch Company, Inc will retain this Application, whether or not it is approved, and that The Missouri Mulch Company, Inc will consider this Application as a continuing statement of the undersigned's financial position and situation until notified otherwise by the Buyer. In order for The Missouri Mulch Company, Inc to sell and to continue to sell to Buyer, Buyer hereby represents and warrants that it is solvent and that it pays its obligations as they become due. The preceding representation and warranty will be deemed to be repeated in each purchase by Buyer. Faxed documents will be deemed as original. No oral agreements will be accepted. The terms on this credit application/agreement overrides all others,

COMPANY NAME _____

AUTHORIZED SIGNATURE _____   DATE _____

SIGNATORY NAME (PRINT) _____   TITLE _____

PERSONAL GUARANTEE

The individual by signing this credit application/agreement is executing this
Application on behalf of Buyer and personally guarantees, and agrees to be personally liable for failure of the performance by Buyer of, any and all of Buyers' obligations under this Application with The Missouri Mulch Company, Inc, including timely payment of any and all sums due to The Missouri Mulch Company, Inc. The personal guarantee also applies in the event that the Buyer declares Bankruptcy or applies for Bankruptcy protection.

AUTHORIZED SIGNATURE _____   DATE _____

GUARANTOR'S NAME (PRINT) _____   SOCIAL SECURITY NUMBER _____

PLEASE PROVIDE US WITH COPIES OF ALL TAX EXEMPTION CERTIFICATES

FOR OFFICE USE ONLY

APPROVED BY _____   DATE APPROVED _____

CREDIT LIMIT AMOUNT _____   ACCOUNT NUMBER _____

SALES REPRESENTATIVE _____