

Hi-Viz Safety Wear LLC

1 Frassetto Way – Unit A Lincoln Park, NJ 07035 (888) 554-4849 (phone) (973) 831-1505 (fax) www.hi-vizsafetywear.com

BUSINESS CREDIT APPLICATION

| Company Name: | | | FAX: | |
|--|-----------------------|--------------|----------------------|----------------------|
| Address: | | | | |
| City: | State: | Zip: | Phone: | |
| Billing Address: | | | | |
| E-Mail address: | | | | |
| Accounting Contact: | | | | |
| OWNER/OWNERS: | | | | |
| Name: | | | S.S. # | |
| Address: | | | | |
| City: | State: | Zip: | Phone: | |
| BANK REFERENCES: | | | | |
| Bank Name: | | | FAX: | |
| Address: | | | | |
| City: | | | | |
| Branch Location: | | | | |
| Checking Acct #: | | | | |
| 3 CREDIT REFERENCES: | | | | |
| Contact | | Acct # | # : | |
| Company Name: | | | | |
| Address: | | | | |
| City: | | | | |
| Contact | | Acct # | # : | |
| Company Name: | | | FAX: | |
| Address: | | | Phone: | |
| City: | | | State: | Zip: |
| Contact | | | | |
| Company Name: | | | | |
| Address: | | | | |
| City: | | | State: | Zip: |
| I do hereby grant Hi-Viz Safety We that the information is true and co | rrect. | | | |
| Applicant's signature attests to fin with the established terms. | ancial responsibility | and personal | guarantee to pay inv | voices in accordance |
| Signature/Title (Company Officer) | | | Date | |
| CREDIT LINE REQUESTED | | | | |