



Light Brite Distributing, Inc.
P.O. Box 156 475 E. Broadway
Trenton, IL 62293
618.224.7314

APPLICATION FOR CREDIT

Date: _____

Firm or Individual Name _____ Email _____

Address _____ City _____ State _____ Zip _____

Main Phone: _____ Cell Phone: _____ Fax# _____ Social Security # _____

Corporation _____ Partnership _____ Sole Proprietor _____ Principal Individual _____

Credit Contact _____ Years in Business _____ PO Required on Invoices _____ Yes _____ No

Tax Exempt _____ Yes _____ No Tax Exempt# _____ Credit Amount Requested _____

Type of Business _____ Website: _____

If Subsidiary, Name of Parent Co. _____ Address _____

Ship to Address _____

Bank Reference

Bank Name _____ City, State _____ Phone or Fax Number _____ Account # _____

Trade References (at least three businesses)

1. _____
Company Name _____ Address _____

City _____ State _____ Phone and Fax Number OR Email address _____

2. _____
Company Name _____ Address _____

City _____ State _____ Phone and Fax Number OR Email address _____

3. _____
Company Name _____ Address _____

City _____ State _____ Phone and Fax Number OR Email address _____

I expressly agree to make payment in full for all purchases in accordance with invoice(s). I also agree to pay finance charges after 30 days on unpaid balance, the lesser of 2% per month of the maximum rate allowed by law. I further agree to pay all costs incurred to collect overdue accounts, including collection agency charges, attorney's fees, court costs and any other charges allowed by law. This agreement becomes effective when accepted by the creditor.

I hereby authorize the person, to whom this application is made, or any credit bureau or other investigative agency employed by such person, to investigate any references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility. If a corporation, partnership, limited liability company or other legal entity not a natural person is applying for credit, the undersigned authorized representative thereof **personally guarantees and agrees to be responsible**, until released by Light Brite Distributing, Inc., from all current and future debts of such entity.

Signature of Authorized _____ Date: _____ Social Security Number: _____
(Representative/ Personal Guarantor) (Must be completed to process application)

Office Use: PLV _____	CRHLD _____	CNO _____	Approved _____
CLS _____	CLM _____	SLSMN _____	Date _____



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GUARANTY

Guaranty given by the undersigned to Light Brite Distributing, Inc. ("Company") in order to induce it to extend credit to, or otherwise become the creditor of, _____ and _____ ("Debtor").

Company Name

Owners Name

The undersigned hereby guarantees the Company the prompt payment, when due, of every claim of the Company which may hereafter arise in favor of the company against Debtor. This is a continuing guaranty and shall remain in force until revoked by the undersigned by notice in writing to the Company, but such revocation shall be effective only as to claims of the company which arise out of transactions entered into after its receipt of such notice. This obligation shall cover the renewal of any claims guaranteed by this instrument, or extensions of time of payment thereof, and shall not be effected by any surrender or release by the Company of any other security held by it for any claim hereby guaranteed. The Company may make changes to the original obligation as it deems proper without notice to the undersigned, and the Guaranty shall remain binding, notwithstanding any changes, alterations or modifications.

In the event of default of Debtor to make payment of any claims of the company when due, the undersigned agrees, without the Company having first to proceed against the Debtor, to pay on demand all sums due and to become due to the Company from Debtor and all losses, costs, attorney fees or expenses which the Company may suffer by reason of Debtor's default.

Print Name- (President or Owner)

Signature (President or Owner)

Date