

CONFIDENTIAL CREDIT APPLICATION

THE UNDERSIGNED hereby applies to **Cooper Trading, Inc.** for the establishment of an open credit account and represents and warrants the following credit information to be true, accurate and complete. Credit privileges may be terminated if applicant fails to pay its' obligations or upon the decision of Cooper Trading, Inc. to terminate such privileges.

_____ Company Name	_____ Business Phone (area code)	_____ Fax Number (area code)
_____ Address	_____ Contact Person	_____ Line of Business
_____ City,State,Zip	_____ Years in Business	_____ Years at Present Address

1. Have you ever operated or done business under another name? _____
If yes, names of other businesses _____
2. Applicant is: _____Sole Proprietorship _____Partnership(General or Limited) _____Corporation
3. Date of Incorporation:_____ State of Incorporation:_____
4. Tax ID Number_____ Tax Exempt? _____Yes _____No D & B Rating_____
5. **Company Officers/Owners:**

A. _____

Name	Residence Address	Phone (area code)
_____	_____	_____
Social Security Number	Title	Percent Ownership
_____	_____	_____

B. _____

Name	Residence Address	Phone (area code)
_____	_____	_____
Social Security Number	Title	Percent Ownership
_____	_____	_____

C. _____

Name	Residence Address	Phone (area code)
_____	_____	_____
Social Security Number	Title	Percent Ownership
_____	_____	_____

6. Bank References:

Business Bank: _____

Name	Location	Account Number
_____	_____	_____
Contact (Name and Title)		Phone (area code)
_____		_____

Personal Bank: _____

Name	Location	Account Number
_____	_____	_____
Contact (Name and Title)		Phone (area code)
_____		_____

7. Business References:

Supplier: _____

Name	Address
_____	_____
Contact (Name and Title)	Phone (area code)
_____	_____

Supplier:

Name	Address
Contact (Name and Title)	Phone (area code)

Supplier:

Name	Address
Contact (Name and Title)	Phone (area code)

Estimated cost of the project? _____ How much credit are you requesting? _____

For credit requests over \$25,000.00, please furnish financial statements.

Do you plan to get a Bank Loan? _____ If yes, Name of Bank _____

Name of Loan Officer: _____ Phone: _____

NON-CONSUMER CREDIT APPLICATION AND AGREEMENT

ANY CREDIT EXTENDED will be in reliance on the statements herein which are certified to be correct and complete. If any part of this application is incorrect or incomplete, then the total indebtedness shall become immediately due and payable.

FOR AND IN CONSIDERATION of goods received or to be received on open account, the undersigned hereby promises to pay Cooper Trading, Inc. the following: 1) the balance shown on each monthly statement in full before the next month's billing date; 2) Service charges of 1 1/2% PER MONTH or 18% PER ANNUM on the amount of the open account which is 30 days past due; 3) The entire balance of the open account, at the option of Cooper Trading, Inc., should any part of the account become past due; 4) All costs and expenses, including attorney's fees, incurred in collecting the open account or any part thereof.

IT IS UNDERSTOOD that purchases will be billed at the end of each month in which the purchases are made. In order to avoid any FINANCE CHARGE, the balance shown on the monthly statement must be paid in full within 30 days of the date of the statement. The FINANCE CHARGE is computed by a periodic rate of 1 1/2% per month which is an annual rate of 18% applied to the previous balance after deduction of any payments, returns, and credits. Any statement not paid within 30 days of the date of the statement shall be considered past due.

THE UNDERSIGNED hereby irrevocably empowers and authorizes any Attorney of any Court of Record to appear for the undersigned in such Court and with or without declaration filed, confess judgment against the undersigned and in favor of Cooper Trading, Inc. for the amount then due with interest on the unpaid balance at the rate of 18% per annum, together with costs of suit and attorney's commissions of 15%, whether due or not, and to waive and release all errors which may intervene in any such proceedings and to consent to immediate execution upon such judgment, hereby ratifying and confirming all that the said attorney may do by virtue hereof.

ALL GOODS RECEIVED or to be received from Cooper Trading, Inc. and all debts incurred to Cooper Trading, Inc. under any open account are for business purposes only. No goods are to be purchased or received for consumer purposes.

I/WE read and understand the credit terms set forth herein and authorize Cooper Trading, Inc. to obtain information from the references listed in this application or by Credit Bureau Report, to check our credit history and trade and bank references for customary credit information. Cooper Trading, Inc. may also release all credit and trade information to other creditors and credit agencies relating to our credit history experience.

THE ABOVE TERMS HAVE BEEN REVIEWED AND ARE HEREBY AGREED TO WITH THE INTENT TO BE LEGALLY BOUND THIS _____ DAY OF _____, 20__.

Name of Business: _____

Signature: _____(SEAL)

Position: _____

Signature: _____(SEAL)

Position: _____

SURETY AGREEMENT

IN CONSIDERATION of Cooper Trading, Inc. furnishing to _____(the Purchaser)

building materials, supplies and other merchandise, on open credit account, the undersigned hereby personally agree(s) that in the event the open account becomes past due, the undersigned will pay Cooper Trading, Inc. all amounts due from the Purchaser, including interest at the rate of 1 1/2% per month or 18% per annum, together with attorney's fees, costs, and expenses incurred by Cooper Trading, Inc. in collecting on any past due account of the Purchaser. An open credit account is considered past due if any balance remains to be paid more than 30 days after the date of the billing statement mailed to the Purchaser.

This Surety Agreement shall continue in full force and effect as long as the Purchaser maintains a credit account with Cooper Trading, Inc. The undersigned hereby waves demand for payment and notice of default. This agreement shall be binding upon heirs, successors, assigns, and may be assigned by Cooper Trading, Inc. without notice. This agreement shall fall under the laws and decisions of the State of Pennsylvania. The undersigned consents to the jurisdiction of any state or federal court located within the State of Pennsylvania. If any provision of this application shall be held invalid or unenforceable, the remainder of this agreement shall still be binding.

The undersigned hereby irrevocably empowers and authorizes any Attorney of any Court of Record to appear for the undersigned in such Court and with or without declaration filed, confess judgment against the undersigned and in favor of Cooper Trading, Inc. for the amount then due with interest on the unpaid balance at the rate of 18% per annum, together with costs of suit and attorney's commissions of 15% whether due or not, and to waive and release all errors which may intervene in any such proceedings and to consent to immediate execution upon such judgment, hereby ratifying and confirming all that the said attorney may do by virtue hereof.

THE ABOVE TERMS HAVE BEEN REVIEWED AND ARE HEREBY AGREED TO WITH THE INTENT TO BE LEGALLY BOUND THIS _____ DAY OF _____, 20_____.

Husband and wife's signatures required for married individuals.

Signature

Signature

Address

Address

CREDIT ACCOUNT CANNOT BE OPENED UNTIL THIS ORIGINAL FORM IS RECEIVED IN OUR OFFICE.

ACCOUNT NUMBER: _____

Gentlemen:

The customer shown below has referred us to you regarding their financial responsibility. Will you please give us your experience as requested below? We will be glad to reciprocate at any time.

Customer: _____

Date Established: _____

Highest Credit: _____

Amount Outstanding: _____

Secured or Unsecured: _____

Checking Account Balance: _____

NSF Checks: _____ Yes _____ No

Could you describe the company's payment history or your overall experience with them.

I, hereby authorize Cooper Trading, Inc. to request information from the bank listed above so they may check our financial stability. I/We authorize a fax or photocopy to be accepted as original signatures.

CUSTOMER SIGNATURE _____

Thank you,

**Peter Cooper
President**

DO NOT FILL OUT THE TOP OF THIS FORM - IT IS FOR OUR RECORDS ONLY.