



APPLICATION FOR CREDIT

COMPANY NAME: _____

BILLING ADDRESS _____

CITY/STATE _____ ZIP _____

PHONE # _____ FAX # _____

STREET ADDRESS (if different from above) _____

CITY/STATE _____ ZIP _____

SHIP TO ADDRESS: _____

CITY/STATE _____ ZIP _____

PHONE # _____ FAX# _____

FED TAX ID # _____ DUNS # _____

BUSINESS ORGANIZATION

____ SOLE PROPRIETORSHIP ____ PARTNERSHIP ____ CORPORATION

____ LIMITED LIABILITY CO. ____ LIMITED PARTNERSHIP

OFFICERS

PRESIDENT: _____ TITLE _____

CFO: _____ TITLE _____

A/P MGR: _____ TITLE _____

EMAIL ADDRESS FOR INVOICE DELIVERY: _____

DATE BUSINESS STARTED _____, _____

REQUESTED CREDIT LIMIT FROM ALLIANCE METAL PRODUCTS _____

STEEL VENDOR REFERENCES

LOAN/BANK INFORMATION:

NAME _____ BRANCH _____ PHONE _____ Fax _____

STREET _____ CITY/STATE _____ ZIP _____

CREDIT LIMIT _____ BALANCE _____

VENDORS: (Minimum three references - Request Steel Vendors)

1. COMPANY NAME: _____ PHONE: _____

CONTACT: _____ FAX: _____

2. COMPANY NAME: _____ PHONE: _____

CONTACT: _____ FAX: _____

3. COMPANY NAME: _____ PHONE: _____

CONTACT: _____ FAX: _____

***PLEASE PROVIDE ALLIANCE METAL PRODUCTS A COPY OF THE STATE SALES AND USE TAX EXEMPTION CERTIFICATE.**

*Return completed form via email to Robert Thomas – rthomas@alliancemetalproducts.net or via fax- 205.403.9951.

The undersigned hereby agrees to and makes this application to Alliance Metal Products, Inc.

The undersigned warrants that the information submitted is true and accurate; and further authorizes Alliance Metal Products, Inc. To investigate the credit references listed on this application.

Should credit availability be granted by Alliance Metal Products, Inc., all decisions with respect to the extensions or continuation of credit shall be at the sole discretion of Alliance Metal Products, Inc. Notwithstanding and advance written notification, Alliance Metal Products, Inc may terminate any credit availability within its sole discretion.

To pay for all purchases according to the terms agreed to and established by Alliance Metal Products, Inc in response to this credit application. No terms and conditions of any invoices or purchase order which differ from the the terms so established by Alliance Metal Products, Inc. will govern the relationship between the parties.

To be responsible for all collections costs and the attorney's fees in the event Alliance Metal Products, Inc. is forced to place the account for collection with an outside agency or through other legal proceedings.

Represents that, as of the date of this application, it is solvent, able to pay it's debts as they come due, and has not filed, nor is subject of any petition in bankruptcy or for reorganization under any federal or state bankruptcy law. Should the foregoing representation become false at any time during the course of a business relationship between the customer and Alliance Metal Products, Inc of while the customer owes any amounts to Alliance Metal Products, Inc, customer agrees to immediately notify Alliance Metal Products, Inc of all facts surrounding and such occurrences.

SIGNATURE _____

(Required)

NAME and TITLE _____

(Printed / Typed)

DATE _____