Thermoplastic Single Ply and Multi-Ply Roofing Systems

Flex Membrane International, Corp. 2670 Leiscz's Bridge Road, Suite 400, Leesport, PA 19533 Phone: 610-916-9500 Fax: 610-916-9501

CREDIT APPLICATION

ABOUT YOUR COMPANY:

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Type: Sole Proprietorship _____ Partnership _____ Corporation: State of _____

Years in Business: _____ Dun & Bradstreet No: _____

Phone: _____ Fax: _____

Amount of Credit Requested: _____

PLEASE LIST PARTNERS OR CORPORATE OFFICERS:

Name, Title, Phone: _____

Name, Title, Phone: _____

Name, Title, Phone:_____

PERSON TO CONTACT REGARDING PURCHASE ORDERS AND INVOICE PAYMENTS:

Name and Title: _____

Address and Phone:_____

PLEASE PROVIDE BANK REFERENCE:

Bank Name and Address: _____

Account No.: _____ Contact Name: _____

Phone:_____ Fax: _____

PLEASE PROVIDE 3 TRADE/CREDIT REFERENCES (GIVE COMPANY NAME, ADDRESS, CONTACT AND PHONE NUMBER)

1. _____

Phone: _____ Fax: _____

2. _____

Phone: _____ Fax: _____

3. _____

Phone: _____ Fax: _____

Authorization: Applicant authorizes FLEX MEMBRANE INTERNATIONAL ('FLEX') to inquire into and obtain from any bank, lending institution, or credit reference, whether listed on the Credit Application or not, any and all information relating to the Applicant's creditworthiness or financial condition.

Personal Guarantee: Guarantor, in consideration of Flex, extending credit to _____ ("Applicant") personally guarantees payment of any and all obligations of Applicant to FLEX. This is a continuing guaranty for such obligations of Applicant as may hereafter accrue. Guarantor waives notice of acceptance, default and nonpayment and consents to and waives notices of any extension, modification or renewal of the guaranteed obligations.

Dated this_____day of_____

Signature_____

Print Name_____

Address_____

Telephone Number_____