



ADMINISTRATIVE OFFICE
 P.O. BOX 116 • BORING, MARYLAND 21020
 Balto (410) 752-1700 Other 1-800-ASAP-321
 Fax (410) 752-7960

All Supplies & Parts, Inc.
 T/A ASAP Compressors
 Baltimore MD 410-752-1700

ASAP Compressors of Virginia, Inc.
 T/A ASAP Compressors
 Providence Forge, VA 804-966-2200

CREDIT APPLICATION

Company: _____ **Phone:** _____

Address: _____ **Fax:** _____

The following information is submitted for your consideration as a basis of extension of credit

We operate: _____ (Type of business) Established for _____ years

Our legal entity is: _____ Corporation _____ Co-Partnership _____ Proprietorship

FID#: _____ Tax-exempt#: _____ (if Applicable)

Please include a copy of tax exemption certificate

(If a corporation, list names of officers and titles. If other entity, list names of partners or owners & SSN)

NAME	TITLE/SOC.SEC.NO.	PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

The following are three trade references that we are presently doing business with.

COMPANY	ACCOUNT #	CONTACT	PHONE/FAX
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

We bank at: _____

TERMS: NET 30 DAYS. LOSS OF TRADE DISCOUNTS AFTER 60 DAYS. SERVICE CHARGE OF 1-1/2% PER MONTH AFTER 30 DAYS. PURCHASER AGREES TO PAY LEGAL AND/OR COLLECTION COSTS ON DELINQUENT INVOICES.

The undersigned hereby certifies that he/she is authorized to sign on behalf of the company and has been informed of ASAP's terms and conditions of sale and agrees to abide by same. In addition, the signature below authorizes release of credit information.

 Printed Name

 Title

 Signature

 Date

SEE REVERSE

Personal Guarantee:

All companies desiring a line of credit must also have one or more people sign (witnessed) and date a personal guarantee as outlined below.

The undersigned Guarantor(s) do hereby jointly and severally and unconditionally guarantee the performance of all Applicant's obligations to All Supplies and Parts, Inc. (ASAP), and ASAP Compressors of Virginia, Inc(ASAP). Including, but not limited to, the payment when due of any and all indebtedness incurred by applicant to ASAP including interest or service charges thereon, and all extensions and renewals thereof, and agree to pay all cost and reasonable attorney's fees incurred in collecting the same or enforcing this Guarantee. This is a continuing guarantee without limitations giving notice or making demand without affecting its rights under this Guarantee or this Agreement; from time to time proceed directly against applicant or any other security.

Signature(s) of Guarantor(s)

1. _____
Signature Dated Social Security Number

Name Printed Witness

2. _____
Signature Dated Social Security Number

Name Printed Witness

3. _____
Signature Dated Social Security Number

Name Printed Witness