

MIAMI
3200 NW 77th Ct.
Miami, FL 33122
Phone: 305.594.4200
Fax: 305.468.7975

FT LAUDERDALE
5301 N. Powerline Rd.
Ft. Lauderdale, FL 33309
T 954.652.2555
F 954.652.2556

JACKSONVILLE
8570 Phillips Hwy.
Suite 111
Jacksonville, FL 32256
Phone: 904.737.2500
Fax: 904.737.2540

Credit Application

General Information

Individual/Company Name _____

Bill to Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax # _____

Purchasing Contact _____ A/P Contact _____

Ship to Address _____

City _____ State _____ Zip Code _____

Email _____ Website _____

Code _____ Additional locations authorized to purchase on account:

City _____ State _____ Zip Code _____

Company Established (Date) _____ Federal Tax Number _____

Sales Tax Exemption Number _____ State _____ P.O. # required Yes No

Last Year Gross Sales Income _____ If Company, Type of Ownership Corporation Partnership Individual

Credit Line Requested _____ Estimated Gross Sales Income for Current Year _____

(Necessary to evaluate a sufficient line of credit)

Account Agreement

We strive to maintain a long-term relationship with our client. In order to keep these long-term relationships maintained and trouble free, we have found it best to emphasize our billing practices at the outset. The company seeking credit (the "customer") and any guarantors agree to the following terms and conditions of sale:

- Same terms of sale, including sales price and time of payment are stated on the invoice. All accounts must be paid in accordance with those terms. Accounts not fully paid within the stated terms automatically accrue interest from the due date at the annual rate of eighteen (18%) percent (1.5% per month).
- If an account becomes delinquent, credit shipments will be automatically terminated, and the delinquent customer placed on a COD basis.
- As a last resort, collection action sometimes becomes necessary. If any account is submitted for collection, the customer agrees to pay all expenses incurred, including a reasonable attorney's fee. Customer can avoid additional expenses by complying with sale terms.
- All charges for goods and services are payable in U.S. currency in Miami, Miami-Dade County, Florida. The laws of the State of Florida shall apply to and govern all sales.
- A security interest is retained on all goods delivered until payment in full is received.
- No goods may be returned for credit except following written authorization in which case a restocking charge will be imposed at twenty percent (20%) of the gross sales price.
- Installation of goods constitutes acceptance for all purposes. Neither the seller nor the manufacturer will be responsible for claims of consequential damage, which may result from the purchase, or use of goods.
- Payment for goods or services with any form of non-negotiable or insufficient funds check will be prosecuted unless payment in U.S. cash or Cashier's Check is received within ten (10) days together with a \$45.00 service charge.
- Appropriate venue herein shall be Miami, Florida for any disputes in any matter arising out of or in any manner involving the validity or construction of this Agreement, or the performance of the parties pursuant to the terms and conditions of this Agreement, or involving the resolution of any and all controversies, claims, or causes of action arising under or pursuant to any of the terms or conditions of this Agreement.

Should you have any questions regarding our policies or any invoice received please call our customer service line at 305.594.4200 or contact us at accounting@opustone.com. We appreciate your business.

Before making application please contact your references and arrange to have the necessary information conveyed to us by fax or email. This will expedite approval of the credit. If this procedure is not followed, it will take approximately 30 days to complete your application.

PLEASE COMPLETE 2ND PAGE

Credit Application

Application for credit is hereby made and the following references given. It is understood this information will be held in the strictest confidence and used only by your credit department.

Bank References

Name _____
Contact _____
Address: _____
Telephone: _____
Fax# _____
Email _____
Account# _____
Type of Account Checking Savings

1) Business References Where Credit Now Extended

Name _____
Contact _____
Address: _____
Telephone: _____
Email _____
Fax# _____
Account# _____

2) Business References Where Credit Now Extended

Name _____
Contact _____
Address: _____
Telephone: _____
Email _____
Fax# _____
Account# _____

3) Business References Where Credit Now Extended

Name _____
Contact _____
Address: _____
Telephone: _____
Email _____
Fax# _____
Account# _____

In making this application for credit, I also understand that an investigative consumer report may be made. I understand that I have the right to make a written request within a reasonable period of time to receive additional information about the nature and scope of this investigative report. If credit is granted I/We agree to the stated terms and agree to abide by them. By signing below, I authorize OPUSTONE to check the credit history of:

Name (please print) _____ Title _____
Signature _____ Date _____

If credit application is a corporation, the personal guarantee below must be executed. In consideration of extending your credit to the above firm at my/our request, I/We hereby personally guarantee the payment of all their obligations to you until withdrawn by me/us by certified mail. I waive my rights to exemptions as to personal property under the laws and constitution of Florida or any other state against the collection of this debt.

Name _____ Title _____
Signature _____ Date _____

Name _____ Title _____
Signature _____ Date _____

FOR CREDIT DEPARTMENT USE ONLY

Credit Approved Credit Denied Max Amount \$ _____

Comments _____

Signed _____ Date _____ SalesRep _____

PL LP FP DP