CREDIT APPLICATION

DOOR TECH, LLC

OFFICE NUMBER: (336)-357-6498

121 Cedar Lane Drive

FAX NUMBER: (336) 357-7836

Lexington, NC 27292

Email: Sales@doortechcorp.com

<u>Company Information:</u>	
Company Name:	
Check One: Incorporated	Partnership DBA
Company Address:	Telephone #:
	Fax#:
	Email:
	State Sales Tax Number:
Owners, Principals and Officers:	
Name:	Name:
Title:	Title:
Address:	Address:
	Phone#:
<u>Trade References:</u>	
Name:	Name:
Address:	Address:
Phone#:	
Contact:	
Name:	
Phone#:	Phone#:

Contact: _____

		Check One:	Savings
Checking Loa	an		
Address:		Account #:	
Contact:			
companies listed on th agrees to pay all collec	o 1.5% per month interest. The undersigned is application to furnish information and autetions costs, and legal fees incurred to collect	thorize the checking of credit. delinquent balances.	The undersigned
Name:	Title:	Date:	
PERSONAL GUARA	ANTEE:		
of all accounts of the c guarantor expressly w demand for payment a	redit extended, the undersigned contracts and ompany seeking credit for 5 years from the caives all notice of acceptance of this guarante and any notice of default by the company seek Revocations of the guarantee shall be in writing	late of this application. The use, notice of extension of credit king credit and all other notice	ndersigned t, presentment of es the guarantor

Name: _____ Title: _____ Date: _____

Bank References: