

## RASMUSSEN IRON WORKS, INC.

Rasmussen Gas Logs/Solaire Infrared Grills

12028 Philadelphia Street, Whittier, CA 90601 (562) 696-8718 Fax (562) 698-3510

E-mail: info@rasmussen.biz www.rasmussen.biz

This form properly completed and signed, must be in the file of each customer wishing to establish or maintain credit. Please type or print in black ink. A copy of your business's most recent financial statement will be furnished only upon request. Attach additional sheets as necessary to complete information. California Accounts please furnish a Resale Card.

Company Legal Name (Include correct punctuation)				Date of Ownership					
Company DBA or Trade Name									
Billing Address/Main Physical Location									
City/State/Zip Code Con				Cour	County			(Are	ea Code) Phone Number
Shipping Address (Attach list of additional locations)				City/State/Zip Code				(Are	ea Code) Fax Number
Billing Email Address		Purchasing Email Ad		l Addr	Address		Prefer	Preferred Billing Method (circle one): Email Fax	
Website Address				Primary Contact:					
Circle One: Sole Prop	rietorship Pa	rtnership	LLC	Su	ab S Corporation Corporation Other:				
Incorporation Date		State	Last Year's Gross Sales		3	Last Year's Net Income		's Net Income	
California Resale No. (if applicable) Federal ID N			No.	Re			quested Line of Credit		
Primary Business Activity/Product Lines Carried								ropose to purchase solaire Grills: Yes No	
(1) Name of Principal, Partner or Officer/Title					Social Security No. Percentage Owned				
Address					City/State/Zip Code				
Spouse's Name					(Area Code) Phone Number				
(2) Name of Principal, Partner or Officer/Title					Social Security No.			P	ercentage Owned
Address					City/State/Zip Code				
Spouse's Name				(Area Code) Phone Number					
(3) Name of Principal, Partner or Officer/Title					Social Security No.			P	ercentage Owned
Address					City/State/Zip Code				
Spouse's Name				(Area Code) Phone Number					
Liability Insurance Company/Policy Number				Agent / (Area Code) Phone Number					
Bank				Branch					
Address				City/State/Zip Code					
(Area Code) Phone Number				Contact					

## **Trade Credit References**

TIAGO OTOGIC ICOTOTO							
Name		Name					
Address			Address				
City	State	Zip Code	City	State	Zip Code		
(Area Code) Phone Number		(Area Code) Phone Number					
(Area Code) Fax Number		(Area Code) Fax Number					
Name		Name					
Address			Address				
City	State	Zip Code	City	State	Zip Code		
(Area Code) Phone Number			(Area Code) Phone Number				
(Area Code) Fax Number		(Area Code) Fax Number					
Do you have any assets plegive amount and details Are there any legal actions Has the company, or any pplease explain (also provide We/I hereby warrant that the Rasmussen with complete authorization is hereby grafinancial information to Rathe requested line of credit	pending? rincipals i e dates) the inform and update nted to all smussen i	Yes No If involved in the comparation in this application ted information for this large of the credit reporting agence.	yes, please explain y, filed for bankruptc n is true, accurate an application as soon a cies, all banks, and ot	y protection?  d complete. as that information the companion of the compan	Yes No If yes,  We/I promise to provide mation is known. Further, ies to release credit and		
We/I promise to pay for all in the dealer/distributor podue, we/I agree to pay serv on my account. In the ever including attorneys' fees ar	purchase olicies. If rice charge nt collection	at any time, for any reales at the rate of $1\frac{1}{2}$ % pon proceedings are nec	ason, we are/I am una er month (18% annua	able to pay fo al rate) on ar	or any purchases when ny past due amount owing		
By signing below, we/I certify that we/I have the full power and authority to act for the above named entity and accept all of the above terms and conditions. The undersigned authorize the release of credit information as requested by Rasmussen Iron Works, Inc.							
Principal/Partner/Officer		Title		ate			
Principal/Partner/Officer Title				ate			
Principal/Partner/Officer				ate			

Note: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided that applicant has the capacity to enter into a binding contract). This is to advise you that if your application for credit is rejected, you have the right to a written statement of the specific reasons for denial. To obtain a statement, please contact Rasmussen at the address listed above within sixty (60) days from the date you are notified of our decision. We will send you a written statement of the reasons for the denial within thirty (30) days of your request for the statement.

A guarantee must be signed by each principal of the business to personally guarantee payment to Rasmussen should credit be extended. Signatures must be without titles.

perform all indebtedness, oblig Rasmussen, pursuant to the for guarantee shall be open and concertified mail, to Rasmussen at manner affect my liability as to I agree that in the event of any entitled to look to me immediate	on of credit by Rasmussen, I hereby pations, or liabilities of the above-name regoing credit application and pursua intinue to be in force until expressly in the address listed on this application any indebtedness existing prior there default at any time by the above namely for full payment without further din the event that suit is brought upon	ed entity at any time owing to ant to Rasmussen's terms of sale. This revoked by written notice sent, via n. Any revocation shall not in any eto. ned entity then Rasmussen shall be demand or notice. I agree to pay			
Signature of Guarantor	Please Print Name	Date			
Home Address	City, State, Zip Code	(Area Code) Phone			
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