

**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		County	(Area Code) Phone Number
Shipping Address (Attach list of additional locations)		City/State/Zip Code	(Area Code) Fax Number
Billing Email Address	Purchasing Email Address	Preferred Billing Method (circle one): Email Fax	
Website Address		Primary Contact:	
Circle One: Sole Proprietorship Partnership LLC Sub S Corporation Corporation Other: _____			
Incorporation Date	Incorporation State	Last Year's Gross Sales	Last Year's Net Income
California Resale No. (if applicable)	Federal ID No.		Requested Line of Credit
Primary Business Activity/Product Lines Carried		Propose to purchase Gas Logs: Yes No	Propose 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.	Percentage Owned
Address		City/State/Zip Code	
Spouse's Name		(Area Code) Phone Number	
(3) Name of Principal, Partner or Officer/Title		Social Security No.	Percentage 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	

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.

In consideration of the extension of credit by Rasmussen, I hereby personally guarantee to pay and/or perform all indebtedness, obligations, or liabilities of the above-named entity at any time owing to Rasmussen, pursuant to the foregoing credit application and pursuant to Rasmussen's terms of sale. This guarantee shall be open and continue to be in force until expressly revoked by written notice sent, via certified mail, to Rasmussen at the address listed on this application. Any revocation shall not in any manner affect my liability as to any indebtedness existing prior thereto. I agree that in the event of any default at any time by the above named entity then Rasmussen shall be entitled to look to me immediately for full payment without further demand or notice. I agree to pay attorneys' fees and court costs in the event that suit is brought upon this agreement.

_____ Signature of Guarantor	_____ Please Print Name	_____ Date
_____ Home Address	_____ City, State, Zip Code	_____ (Area Code) Phone

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