



Please check the Maso, LLC Company with which you would like to establish credit:

- Masolite, LLC - Fort Wayne, IN
- Masolite Carters - Logansport, IN
- Precast, LLC - Monroeville, IN

**Return completed application to:  
aharrison@masolite.com or fax  
to 855-870-4650.**

2200 Lafontain Street | Fort Wayne, Indiana 46802  
T: 260-432-3568 | www.masolite.com

## CREDIT APPLICATION

**SECTION 1: BUSINESS INFORMATION – COMPLETE THIS SECTION EVEN IF ATTACHING OTHER DOCUMENTS.**

LEGAL BUSINESS NAME		TRADE/DBA NAME		FEDERAL ID#
FULL PHYSICAL ADDRESS				COUNTY
FULL BILLING ADDRESS				COUNTY
TELEPHONE NUMBER	FAX NUMBER	WEBSITE		
BUSINESS TYPE: <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLP <input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC				
STATE OF INCORPORATION	DATE OF INCORPORATION	YEARS IN BUSINESS	HAVE YOU OR YOUR COMPANY DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please attach a separate sheet with details.	
SALES TAX EXEMPT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF PURCHASES ARE EXEMPT FROM SALES TAX – A SIGNED EXEMPTION CERTIFICATE MUST BE ATTACHED. WE ARE REQUIRED BY LAW TO COLLECT SALES TAX; THEREFORE, TAXES WILL BE CHARGED ON ALL INVOICES UNTIL A PROPERLY COMPLETED EXEMPTION CERTIFICATE IS RECEIVED. <b>THE CUSTOMER WILL BE RESPONSIBLE FOR ALL TAXES CHARGED UNTIL THE CERTIFICATE IS RECEIVED.</b>				

**SECTION 2: ACCOUNTS PAYABLE INFORMATION**  SEE ATTACHED

A/P CONTACT NAME	TELEPHONE NUMBER	EMAIL ADDRESS
EMAIL ADDRESS TO RECEIVE ELECTRONIC INVOICING IF DIFFERENT FROM A/P EMAIL ADDRESS ABOVE		
PURCHASE ORDER REQUIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO	SPECIFIC AUTHORIZED PERSON? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PROVIDE NAME: _____	

**SECTION 3: NAME OF OWNER, OFFICERS, OR PERSONS RESPONSIBLE FOR ACCOUNT**  SEE ATTACHED

OWNER OR OFFICER NAME	TITLE
OWNER OR OFFICER NAME	TITLE
OWNER OR OFFICER NAME	TITLE
OWNER OR OFFICER NAME	TITLE

**SECTION 4: FINANCIAL INFORMATION**  SEE ATTACHED

BANK NAME	TELEPHONE NUMBER	FAX NUMBER
FULL MAILING ADDRESS		
NAME OF BANK OFFICER	EMAIL	

**SECTION 5: TRADE REFERENCES (a minimum of three (3) references)**  SEE ATTACHED

COMPANY NAME	TELEPHONE NUMBER	FAX NUMBER
CONTACT NAME	EMAIL ADDRESS	
COMPANY NAME	TELEPHONE NUMBER	FAX NUMBER
CONTACT NAME	EMAIL ADDRESS	
COMPANY NAME	TELEPHONE NUMBER	FAX NUMBER
CONTACT NAME	EMAIL ADDRESS	
COMPANY NAME	TELEPHONE NUMBER	FAX NUMBER
CONTACT NAME	TELEPHONE NUMBER	FAX NUMBER
CONTACT NAME	EMAIL ADDRESS	

**SECTION 6: AGREEMENT**

The undersigned ("Applicant") hereby applies for credit from Maso, LLC, including companies it now owns or hereafter, may come into ownership thereof (hereinafter collectively referred to as "Vendor"). Applicant agrees to be bound by all of the terms and conditions contained in this Application, on Vendor's invoices and Vendor's Terms and Conditions of Sale. In no event shall terms and conditions of Applicant's documents, such as purchase orders, confirmations, acceptances, etc., modify or add to Vendor's terms. Applicant agrees that all amounts payable on or before the net due date as shown on each of the Vendor's invoices will be paid by the said due date, and, if not paid on or before said due date, will be deemed to be delinquent. If no due date is listed on an invoice, terms for that sale will be NET 30 days. Should Applicant default on any payment(s), Vendor reserves the right to declare all invoice amounts due and payable without notice to Applicant and shall have the right to charge a finance fee of 1.5% (or the highest rate allowed by law, if less) per month, for any invoice that is past due. In the event of default, Applicant agrees to pay collection expenses or attorney's fees if the account is placed with a collection agency or attorney, whether or not suit is filed. The Applicant agrees to inform Vendor in writing of any changes in the form of ownership within ten (10) days of such changes.

Applicant hereby authorizes Vendor to obtain any and all information it deems reasonably necessary from any and all sources or references listed on this Credit Application and from any credit bureau, creditors of Applicant, trade references, bank, or other financial institutions. Applicant further authorizes each of such sources, references, credit bureaus, creditors, banks, and

financial institutions to supply Vendor with such information as Vendor deems reasonably necessary to consider this Application. You represent that Applicant is a valid business entity, that you are an authorized representative of Applicant with authority to enter into these contractual agreements, and the information contained in this Application and any attachment is true, correct and complete to the best of your information, knowledge, and belief.

The parties expressly agree that any and all disputes of whatever character arising under this agreement or under any statute or common law relating, directly or indirectly, to the subject matter of this agreement or the dealings of the parties relating thereto, shall be litigated, at the Vendor's sole discretion, either in the Allen County Courthouse of Allen County, State of Indiana, or in the federal district court having jurisdiction for such county, or, alternatively, in the state or the federal district court having jurisdiction for the count in which Applicant's business is located at the time of filing of suit. Applicant hereby consents to the jurisdiction of said courts and that said disputes shall be governed by laws of said respective states. Jury by trial is waived. All decisions with respect to the extension or continuation of credit shall be in the sole discretion of the Vendor.

\_\_\_\_\_  
Applicant Company Name  
\_\_\_\_\_  
Authorized Signature  
\_\_\_\_\_  
Printed or Typed Name of Signer  
\_\_\_\_\_  
Company Position Held by Signer

\_\_\_\_\_  
Applicant Company Name  
\_\_\_\_\_  
Authorized Signature  
\_\_\_\_\_  
Printed or Typed Name of Signer  
\_\_\_\_\_  
Company Position Held by Signer

**SECTION 7: PERSONAL GUARANTY**

For, and in consideration of, the extending credit to \_\_\_\_\_ (“Applicant”), I/We, the undersigned Guarantor(s) personally guarantee, absolutely and unconditionally guarantee, jointly and severally guarantee to Maso, LLC (“Vendor”) and its affiliated companies, the prompt payment when due, not merely the collection, on all indebtedness of the Applicant to Vendor which is now due or may at any time hereafter become due regardless of the form or manner in which incurred. This is a continuing guarantee and shall remain in force until revoked by me by notice in writing, Certified Mail Return Receipt Requested, to Vendor, but such revocation shall be effective only as to claims of Vendor, which arise out of transactions entered into after Vendor’s receipt of such notice. The incorporation, merger, reorganization or sale of the Applicant shall not operate as a termination of the guarantee, and such guarantee shall continue as to credit extended such other entity. This obligation shall cover all indebtedness which may from time to time be owed to Vendor by Applicant on account. “On account” shall mean the total balance of the amount presently and hereafter owed by Applicant, plus all interest and charges added thereto. Guarantor’s obligation shall not be affected by surrender or release by Vendor of any other security held by it for any claim hereby guaranteed. In the event of default by Applicant to make payment on its account with Vendor when due, I/We agree, without Vendor first proceeding against Applicant, to pay on demand all sums then due and to become due to Vendor from Applicant, including, but not limited to, all monthly service charges attorneys' fees, costs and interests which Vendor may suffer by reason of Applicant's default. The undersigned further agrees to pay all costs of collection, in any amounts due are collected by legal action or through an attorney-at-law.

I/We hereby authorize release to Vendor of all information, contained in my (our) account file. I/We authorize that the photocopy of the authorized be accepted with the same authority as the original.

\_\_\_\_\_  
Guarantor Signature  
\_\_\_\_\_  
Printed or Typed Name of Signer  
\_\_\_\_\_  
Social Security Number of Guarantor

\_\_\_\_\_  
Guarantor Signature  
\_\_\_\_\_  
Printed or Typed Name of Signer  
\_\_\_\_\_  
Social Security Number of Guarantor

## AUTHORIZATION TO RELEASE CREDIT INFORMATION

I, the undersigned officer of the below named company, hereby authorize the Maso, LLC, including companies it now owns or hereafter, may come into ownership thereof to contact any or all of the references listed herein and further utilize outside consumer and commercial reporting services to obtain information regarding our credit standing as deemed necessary for the purpose of establishing a credit account with Maso, LLC Companies.

I, on behalf of the company, authorize and instruct any person or credit agency or other organization to furnish any information about our company that they may have. I understand that the record(s) provided will be furnished in confidence and I agree to hold the reporting agency and/or creditors harmless as a condition for providing the record(s).

If any of the references listed herein have any questions regarding this release of information, they can contact me at the number or email listed below.

---

Company Name

---

Telephone Number

---

Name (Printed)

---

Title

---

Signature

---

Date

---

Email