



Corporate Credit Department
 Box 249 • Dodge Center, MN • 55927
 Toll Free 1-800-430-6110
 Fax 507-633-8811
 credit@mneilus.com

Credit Application - Form
 Credit
 05/09/11
 1 of 2

Company Name: _____

Billing Address: _____

City: _____ State: _____ ZIP + 4: _____

Phone: _____ Fax: _____

Shipping Address: _____

City: _____ State: _____ ZIP + 4: _____

Type of Business: _____ Year Started: _____ Legal Form: _____ Fed ID#: _____

TAX EXEMPT? Yes _____ No _____ # of Employees: _____ Credit Requested \$: _____

****All States requires an Exemption Certificate on file****

Buyer: _____ Phone: _____ Email: _____

A/P Contact: _____ Phone: _____ Email: _____

How would you like to receive invoices? _____ Fax Fax #: _____

_____ Email Address: _____

RECEIVING & UNLOADING INFORMATION

Receiving Hours:	Max. Skid Weight	_____ LBS	Unload:	_____ By Hand
M - F _____ AM				_____ Forklift
_____ PM	Max. Bundle Weight	_____ LBS		_____ Overhead Crane
				_____ Other

Require MILL CERTIFICATION? Yes _____ No _____ Fax #: _____

Email: _____

Special packaging instructions: _____

Directions to your location: _____



**** OUR TERMS ARE: NET 30 DAYS FROM DATE OF INVOICE ****

Owner(s): _____ Email: _____

Home Address: _____

Social Security #: _____ Home Phone: _____

BANK REFERENCE:

Bank Name: _____ Phone: _____

Address: _____ Fax: _____

TRADE REFERENCES: (Please include at least one Steel Supplier)

Business Name: _____ Phone: _____

Address: _____ Fax: _____

Business Name: _____ Phone: _____

Address: _____ Fax: _____

Business Name: _____ Phone: _____

Address: _____ Fax: _____

Business Name: _____ Phone: _____

Address: _____ Fax: _____

Applicant's signature certifies that the information provided is correct. A service charge will be applied to all accounts past due. In the event of my account becoming seriously past due, I am aware that I will be held responsible for any legal and/or collection fees assessed to collect the debt.

I authorize you to contact references and obtain information that may be needed to establish a credit account with McNeilus Steel, Inc.

Date: _____

Authorized Signature: _____

Title: _____



Bank Reference Form

COMPLETE TOP PORTION ONLY. PLEASE SIGN BY "X" AND SEND TO YOUR BANK.

Name & Address of Business Accounts:

Name & Address of Bank:

	ATTN:

Account Number(s): _____

THE UNDERSIGNED HEREBY AUTHORIZES THE FOLLOWING INFORMATION TO BE RELEASED TO McNeilus Steel, Inc.

Signature _____ Date _____

Print Name _____ Position _____

BANK COMPLETE BOTTOM PORTION.

We have been asked to extend unsecured credit for the above applicant. Your bank has been given as a reference. Please complete the following:

THE CONFIDENTIALITY OF THIS INFORMATION WILL BE PRESERVED EXCEPT WHERE DISCLOSURE OF THIS INFORMATION IS REQUIRED BY APPLICABLE LAW. WE WILL NOT HOLD YOU OR ANY STAFF MEMBER RESPONSIBLE FOR THE ACCURACY OF THIS REPORT.

DEPOSITORY ACCOUNTS

- 1) This customer has been with our bank since _____ .
 2) Please complete:

ACCT NO	TYPE	Ave Balance (past 6 months)	Current Balance	Overdrafts or NSF Checks

CREDIT ACCOUNTS

- 3) We have granted credit to them since _____
 4) Total amount of REVOLVING line of credit extended _____
 5) Is this line secured? _____ If so, by what? _____
 6) Current balance on the line _____ 7) Renewal date of the line _____
 8) Has the line been handled as agreed? _____

Thank you for your cooperation.

Email completed form to:

McNeilus Steel, Inc

credit@mcneilus.com

Mark Dulaney, Corp Credit Manager

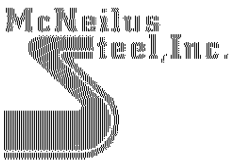
800.430.6110 ext 3024

BANK OFFICER

Name _____

Phone _____ Ext _____

Signature _____ Date _____



Legal Business Name: _____

Trade Name: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

In consideration of the extension of credit to the above named company, I personally and individually hereby unconditionally guarantee the payment of whatever amount shall at any time be past due (including all expenses of collection, reasonable attorneys and/or collection fees). In recognition that my credit history may be a continuing, necessary factor in the evaluation of this ongoing personal guaranty, I consent to and authorize creditor to obtain and use my consumer credit report periodically in the ongoing credit evaluation process of the effect and duration of this personal guaranty.

This agreement is made and entered into in the State of Minnesota and, at creditor's option; any litigation of any dispute arising hereunder may be commenced in the State of Minnesota. In that event, I the undersigned guarantor hereby consent to the jurisdiction of the courts of the State of Minnesota.

This Guaranty shall continue in full force and effect unless written notice of revocation is received by McNeilus Steel, Inc. by certified mail. Such notice of revocation shall be ineffective as to any then existing indebtedness of customer to McNeilus Steel, Inc. or as to any transaction or commitment previously undertaken by McNeilus Steel, Inc. in reliance upon this Guaranty.

Signature

Date

Type or print name

SSN