

**NEWAVE TC - WASHINGTON LLC****Attn: Billing Office**

10910 Portland Rd. NE

Brooks, OR 97305

971-239-4764

**NEWAVE TC - WASHINGTON, LLC****Warehouse Location**

3413 Chapel Street

Building 3, Suite A &amp; B

Lakewood, WA 98439

253-200-0420

## CREDIT APPLICATION

*Fill out and return to Maria@ValleyFabCorp.com or by Fax: 503-715-1292*

### Company Information

|                             |                       |   |
|-----------------------------|-----------------------|---|
| Legal Business Name:        | Phone:                |   |
| Doing Business As:          | Fax:                  |   |
| Street Address:             |                       |   |
| City: _____                 | State: _____          | Zip Code: _____   |
| Years in Business: _____    | Federal Tax ID: _____ | Credit Limit Request: <input type="checkbox"/> Yes Limit: \$ _____  |
| Business Description: _____ |                       | Business Type: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> LLC<br><small>(Please Check One)</small> |
|                             |                       | <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership   |

### Accounts Payable Information

|                               |                 |            |
|-------------------------------|-----------------|------------|
| AP Contact Name: _____        | Title: _____    |            |
| Email: _____                  | Phone: _____    |            |
| Billing Street Address: _____ | City: _____     |            |
| State: _____                  | Zip Code: _____ | Fax: _____ |

### Ownership Information

|                       |                              |
|-----------------------|------------------------------|
| Owner Name: _____     | Title: _____                 |
| Email: _____          | Phone: _____                 |
| Street Address: _____ |                              |
| City: _____           | State: _____ Zip Code: _____ |
| Owner Name: _____     | Title: _____                 |
| Email: _____          | Phone: _____                 |
| Street Address: _____ |                              |
| City: _____           | State: _____ Zip Code: _____ |
| Other Officers: _____ |                              |

### Bank References

|   |                              |
|---|------------------------------|
| Bank Name: _____                              | Branch: _____                |
| City: _____                                   | State: _____ Zip Code: _____ |
| Name of Bank Officer or Representative: _____ |                              |
| Email: _____                                  | Phone: _____                 |

*Please complete back of form*

## Trade References

|                       |                     |                       |
|-----------------------|---------------------|-----------------------|
| Company Name: _____   | Contact Name: _____ |                       |
| Email: _____          | Phone: _____        | Account Number: _____ |
| Street Address: _____ |                     |                       |
| City: _____           | State: _____        | Zip Code: _____       |
| Company Name: _____   | Contact Name: _____ |                       |
| Email: _____          | Phone: _____        | Account Number: _____ |
| Street Address: _____ |                     |                       |
| City: _____           | State: _____        | Zip Code: _____       |
| Company Name: _____   | Contact Name: _____ |                       |
| Email: _____          | Phone: _____        | Account Number: _____ |
| Street Address: _____ |                     |                       |
| City: _____           | State: _____        | Zip Code: _____       |

## Certification



I hereby certify that the information contained herein is complete and accurate and made for the purpose of obtain credit from Newave Tower Components-Washington, LLC. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Authorized Signature

Authorized Printed Name

Date

Title

## Personal Guarantee

The undersigned individual(s), partners or stockholders, in consideration for the granting of credit to the above referenced commercial enterprise by Newave Tower Components - Washington, LLC, do hereby agree to personally guarantee all obligations incurred by the Company whenever the Company shall fail to pay the same. The undersigned is authorizing Newave Tower Components - Washington, LLC to obtain a consumer credit report. It is also understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company.

I do hereby waive notice of default, nonpayment and notice thereof and consent to any modification or renewal of the credit agreement guaranteed. The undersigned also agrees to pay all attorneys' fees and court cost that may be incurred in connection with the efforts to collect, together with all costs incurred should legal action or suit be necessary to collect this debt. This guarantee shall be governed by Washington law, all disputes will be tried by appropriate courts in Pierce County, Washington and guarantor hereby consents and submits to the jurisdiction and venue of said court over his/her person.

Authorized Signature

Authorized Printed Name

Date

Title