



HHH Tempering Resources, Inc.
11500 Miramar Parkway, Suite 300
Miramar, Florida 33025-5807
(P) 954-441-5057 (F) 954-441-5059

TO OBTAIN CREDIT FROM CREDITOR, CUSTOMER AGREES TO CREDITOR'S USUAL TERMS AND CONDITIONS AS PROMULGATED AND AMENDED BY CREDITOR FROM TIME TO TIME, AND REPRESENTS AND STATES THE FOLLOWING, AND AUTHORIZES RELEASE OF ANY INFORMATION PERTAINING TO CUSTOMER'S FINANCIAL CONDITIONS FROM ANY THIRD PARTIES WHICH MAY VERIFY SAME.(PLEASE PROVIDE A COPY OF YOUR CURRENT RE-SALE CERTIFICATE IF APPLICABLE.)

"CREDITOR" IS HHH Tempering Resources, Inc. (and its related corporations or subsidiaries)

CREDITOR BUSINESS ENTITY (NAME)

TELEPHONE: _____

Bill To Address:

CELL: _____

FAX: _____

TAX EXEMPT ID NUMBER: _____

STATE OF EXEMPTION: _____

STATE OF INCORPORATION: _____

FEDERAL TAX ID NO.: _____

Ship To Address:

COUNTY: _____

CUSTOMER IS A (check appropriate box):

[] SOLE OWNER

[] PARTNERSHIP

[] CORPORATION

[] LLC

OWNER OR OFFICER NAME: _____ TITLE: _____

Address: _____

SSAN: _____

HOME PHONE: _____ BUSINESS PHONE: _____ FAX: _____

OWNER OR OFFICER NAME 2: _____ TITLE: _____

Address: _____

SSAN: _____

HOME PHONE: _____ BUSINESS PHONE: _____ FAX: _____



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1. BUSINESS REFERENCES, TRADE NAMES AND OTHER BUSINESS INFORMATION
2. CUSTOMER AGREES TO PAY SERVICES CHARGES OF 2% PER MONTH OR THE HIGHEST RATE ALLOWED BY LAW (WHICHEVER IS THE LESSER) FROM THE DUE DATE OF EACH INVOICE TO DATE OF PAYMENT. IN EVENT CUSTOMER'S ACCOUNT IS PLACED FOR COLLECTION, CUSTOMER AGREES TO COLLECTION AND/OR ATTORNEY FEES OF 25% OF THE AMOUNT OWED.
3. PERSONAL GUARANTY. IN CONSIDERATION OF CREDITOR EXTENDING CREDIT TO CUSTOMER, THE UNDERSIGNED PERSONALLY AND INDIVIDUALLY GUARANTEE UNCONDITIONALLY FULL AND PROMPT PAYMENT OF PAST, PRESENT AND FUTURE OBLIGATIONS AND TERMS DUE CREDITOR FROM CUSTOMER, AND/OR ANY SUCCESSOR IN INTEREST (CORPORATE OR NON CORPORATE) TO CUSTOMER'S BUSINESS, HEREBY WAIVING NOTICE OF ACCEPTANCE OF THIS GUARANTY, NOTICE OF RENDERING SERVICES AND/OR SALE OF GOODS PROVIDED CUSTOMER BY CREDITOR AND NOTICE OF DEFAULT OR CHANGE OR EXTENSION OF CREDIT TERMS. THE UNDERSIGNED CONSENT TO ANY EXTENSION OF TIME FOR PAYMENT AND ASSERT THAT THIS IS A CONTINUING GUARANTY OF PAYMENT TO CREDITOR UNTIL REVOKED IN WRITING. ANY MARRIED INDIVIDUAL SIGNATORY TO THIS APPLICATION REPRESENTS THAT ANY CREDIT GRANTED PURSUANT TO THE SUBJECT ACCOUNT IS AN OBLIGATION INCURRED IN THE INTEREST OF HIS OR HER MARRIAGE OR FAMILY.

ALL PARTNERS OR OFFICERS OF CUSTOMER SHOULD SIGN AND AGREES TO BE BOUND PERSONALLY:

_____	_____	_____
NAME	SSAN	ADDRESS
_____	_____	_____
NAME	SSAN	ADDRESS
_____	_____	_____
NAME	SSAN	ADDRESS



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I HEREBY AUTHORIZE **HHH Tempering Resources, Inc.** TO INVESTIGATE THE REFERENCES I HAVE FURNISHED FOR PURPOSES OF APPLYING FOR CREDIT.

BUSINESS BANK ACCOUNT & REFERENCE: _____

ACCOUNT NUMBER: _____

BANK ADDRESS: _____

BANK TELEPHONE NUMBER: _____ FAX NUMBER: _____

BANK CONTACT NAME: _____ TELEPHONE NUMBER: _____

WHAT IS THE NATURE OF YOUR BUSINESS: _____

CUSTOMER TYPE: **GLASS SHOP** **MANUFACTURER** **OEM** **EXPORTER**

TOTAL NUMMBER OF EMPLOYEES IN YOUR BUSINESS: _____ YEAR BUSINESS STARTED _____

BUSINESS REFRENCES (glass and other general vendors) :

BUSINESS REFERENCE 1:

BUSINESS NAME: _____ CONTACT NAME: _____

ADDRESS: _____ PHONE: _____ FAX: _____

BUSINESS REFERENCE 2:

BUSINESS NAME: _____ CONTACT NAME: _____

ADDRESS: _____ PHONE: _____ FAX: _____

BUSINESS REFERENCE 3:

BUSINESS NAME: _____ CONTACT NAME: _____

ADDRESS: _____ PHONE: _____ FAX: _____

BUSINESS REFERENCE 4:

BUSINESS NAME: _____ CONTACT NAME: _____

ADDRESS: _____ PHONE: _____ FAX: _____



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NOTES:

FOR OFFICE USE ONLY:

Date: _____

Credit Manager's approval: _____ Officer's Approval: _____

HHH Account No. _____ Pricing Level # _____

Terms of Credit: COD N-30 Other: _____

Next review date: _____