

RGI FOODS, INC.
1012 Avalon Ave.
Muscle Shoals, Al 35661
205-335-4327

CONSUMER CREDIT APPLICATION

DATE _____
BUSINESS NAME _____
ADDRESS _____ PHONE# _____
CITY _____ STATE _____ ZIP _____
FEDERAL TAX ID# _____ STATE TAX ID# _____

OWNER'S NAME _____
ADDRESS _____ PHONE# _____
CITY _____ STATE _____ ZIP _____
SOCIAL SECURITY# _____
DRIVERS LICENSE# _____ (PLEASE ATTACH A COPY)
HAVE YOU EVER FILED BANKRUPTCY? _____ IF SO, WHEN? _____

CREDIT REFERENCES:

(OTHER FOOD SERVICE COMPANIES)

NAME _____
ADDRESS _____
PHONE# _____ FAX# _____

NAME _____
ADDRESS _____
PHONE# _____ FAX# _____

BANK REFERENCE:

BANK NAME _____
BANK ADDRESS _____
PHONE# _____ ACCOUNT # _____

*****NOTICE*****

WHEN APPLYING FOR CREDIT, THERE WILL BE A CREDIT HISTORY RUN ON YOUR PERSONAL AND BUSINESS ACCOUNTS.

APPLICANT_____

DATE_____

THE UNDERSIGNED AUTHORIZES INQUIRY AS TO CREDIT INFORMATION . WE FURTHER ACKNOWLEDGE THAT CREDIT PRIVILEGES, IF GRANTED, MAY BE WITHDRAWN AT ANY TIME.

APPLICANT_____

DATE_____

RGI FOODS, INC.
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UNLIMITED GUARANTY

For good and valuable consideration, and as an inducement for RGI Foods to extend credit to _____(buyer), the undersigned jointly, severally, and unconditionally guarantee to RGI Foods the prompt and full payment of all sums now or hereinafter-due RGI Foods from _____(buyer).

All accounts with outstanding invoices more than 30 days will be charged 1.5% interest rate.

The undersigned also agree to remain fully bound on this guaranty notwithstanding any extension, forbearance, waiver, release, discharge, or substitution of any collateral or security for the debt. In the event of default, RGI Foods , Inc. may seek payment directly from the undersigned without need to proceed first against the buyer.

This guaranty shall be binding upon and inure to the benefit of the parties, their successors, assigns, and personal representatives. In the event of default , a reasonable attorney's fee and any other cost incurred will be charged to all accounts that are not paid as agreed upon.

APPLICANT(S)_____

DATE_____

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