

## Kim International Manufacturing, L.P. Credit Application

MAIL or FAX TO: 14840 Landmark Blvd. Dallas, Texas 75254 FAX # (800) 608-3322

BU		DESCRIPTION OF BUSINESS					
NAME OF BUSINESS			NO. OF EMPLOYE	ES CRI	EDIT REQUESTED	TYPE OF BUSINESS	
LEGAL (IF DIFFERENT)			IN BUSINESS SIN	IN BUSINESS SINCE			
ADDRESS				BUSINESS STRUCTURE  CORPORATION PARTNERSHIP PROPRIETORSHIP			
CITY			NAME OF	DIVISION/SUBSIDIARY  NAME OF PARENT			
STATE	ZIP PHONE			COMPANY  J.B.T. #			
	COMPANY PR	INCIPALS RESPO	NSIBLE FOR BUS	SINESS TI	RANSACTIONS		
NAME:	TITLE:		ADDRESS:	DDRESS: PHONE:			
NAME:	TITLE:		ADDRESS:	DRESS: PHONE:			
NAME:	TITLE:		ADDRESS:		PHONE:		
		BAN	K REFERENCES				
NAME OF BANK			NAME TO CONT	ACT			
BRANCH			ADDRESS	ADDRESS			
CHECKING ACCOUNT NO.			TELEPHONE NU	TELEPHONE NUMBER			
	E REFERENCES		FAVAN	umpep.			
	FIRM NAME		PHONE NUMBER		FAX N	UMBER	
				L			
	CONFIRMATION	OF INFORMATIC	N ACCURACY AN	D PERSO	NAL GUARAN	TY	
shall be subject to interemade through bankrupto	est at the maximum rate by or probate proceeding	e allowable by law until pass, I/we agree to pay a rea	npt payment according to te id. If my/our account is pla sonable amount in attorney' exas 75254. It is agreed th	ced in the har s fees on both	nds of an attorney for the principal and interest.	collection, or if collection is est charge. All charges are	
I/we hereby consent to the billing arrangements, the	he personal jurisdiction of undersigned accepts p	of the courts of the State of t	f Texas in any such proceed of the items received and g rify that all information supp	ling and venue juarantees pay	shall be proper in Dall ment of the purchase	as county. Notwithstanding	
SIGNATURE OF OW	NER OR OFFICER		TITLE	LE			
SIGNATURE OF PERSONAL GUARANTOR SO			SOCIAL SECURITY NU	JMBER	DAT		