

**STONE CRAFTERS LLC**  
BILLING INFORMATION

**BUSINESS NAME:** \_\_\_\_\_ **PHONE** \_\_\_\_\_ **DATE** \_\_\_\_\_  
**FAX** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **OWN** \_\_\_\_\_ **RENT** \_\_\_\_\_  
**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**CONTACTS:** \_\_\_\_\_ **CONTACT EMAIL:** \_\_\_\_\_  
**PHONE # FOR CONTACT:** \_\_\_\_\_

**TRADE NAMES USED IF ANY** \_\_\_\_\_

**ORGANIZATION TYPE** \_\_\_\_\_ **CORPORATION** \_\_\_\_\_ **PARTNERSHIP** \_\_\_\_\_ **INDIVID.** \_\_\_\_\_  
**TYPE OF BUSINESS** \_\_\_\_\_ **YEARS IN BUSINESS** \_\_\_\_\_

**FED TAX ID#** \_\_\_\_\_ **TAX CERTIFICATE** \_\_\_\_\_

**BANK REFERENCES**  
**NAME** \_\_\_\_\_ **BRANCH** \_\_\_\_\_  
**CONTACT NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**ALL CHECKING ACCOUNT #'S FOR BUSINESS** \_\_\_\_\_

**PRINCIPALS OF FIRM**  
**NAME** \_\_\_\_\_ **SOCIAL SECURITY #** \_\_\_\_\_ **HOME ADDRESS** \_\_\_\_\_ **HOME PHONE** \_\_\_\_\_ **DRIVER'S LICENSE #** \_\_\_\_\_

**TRADE REFERENCES-PLEASE LIST THREE**  
**NAME** \_\_\_\_\_ **ADDRESS** \_\_\_\_\_ **PHONE #** \_\_\_\_\_ **CREDIT DEPT FAX #** \_\_\_\_\_

**I. COMPLETE IF BUSINESS IS SOLE PROPRIETORSHIP**

THE UNDERSIGNED ACKNOWLEDGES THAT HE/SHE IS THE SOLE PROPRIETOR OR THE ABOVE NAMED BUSINESS AND ACKNOWLEDGES A PERSONAL RESPONSIBILITY FOR THE PAYMENT OF ALL AMOUNTS DUE TO STONE CRAFTERS LLC FROM THE ABOVE NAMED BUSINESS. THE UNDERSIGNED ALSO ACKNOWLEDGES THAT IN THE EVENT THAT STONE CRAFTERS LLC IS REQUIRED TO INCUR COSTS FOR THE COLLECTION OF ANY AMOUNT DUE FROM YOUR BUSINESS, THE STONE CRAFTERS LLC SHALL BE ENTITLED TO RECOVER ANY AND ALL COLLECTION COSTS INCLUDING ATTORNEY'S FEES AND INTEREST. INTEREST SHALL BE CHARGED ON THE OUTSTANDING BALANCES AFTER 30 DAYS AT THE RATE OF 1-1/2% PER MONTH. AN ATTORNEY'S FEE SHALL BE CHARGED AT THE RATE OF 25% OF THE AMOUNT DUE.

**NAME OF BUSINESS** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_ **PRINT NAME/TITLE** \_\_\_\_\_

**II. COMPLETE IF PARTNERSHIP OR CORPORATION**

THE UNDERSIGNED IS A GENERAL PARTNER/SHAREHOLDER (STRIKE ONE) OF THE ABOVE NAMED BUSINESS AND REPRESENTS THAT HE/SHE IS AUTHORIZED TO MAKE THIS CREDIT APPLICATION ON BEHALF OF THE BUSINESS. THE CORPORATION/PARTNERSHIP IS PRIMARILY RESPONSIBLE FOR THE PAYMENT OF ALL AMOUNTS DUE TO STONE CRAFTERS LLC. INTEREST SHALL BE CHARGED ON THE OUTSTANDING BALANCES AFTER 30 DAYS AT THE RATE OF 1-1/2% PER MONTH. AN ATTORNEY'S FEE SHALL BE CHARGED AT THE RATE OF 25% OF THE AMOUNT DUE.

FURTHER THE UNDERSIGNED UNCONDITIONALLY PERSONALLY GUARANTEES THE PAYMENT OF ALL AMOUNTS DUE FROM THE ABOVE NAMED BUSINESS TO STONE CRAFTERS LLC IN THE EVENT THAT PAYMENT IS NOT MADE BY THE BUSINESS WHEN DUE. THE UNDERSIGNED UNDERSTANDS THAT THIS IS A CONTINUING GUARANTEE AND WILL REQUIRE NO FURTHER NOTICE TO THE GUARANTOR AND SHALL REMAIN IN FULL FORCE AND EFFECT AND APPLY TO ALL PRESENT AND FUTURE MATTERS AND TRANSACTIONS UNTIL WRITTEN NOTICE OF ITS DISCONTINUANCE IS RECEIVED BY STONE CRAFTERS LLC. IN THE EVENT OF SUCH NOTICE, THE GUARANTEE WILL BECOME INEFFECTIVE FOR FUTURE INDEBTEDNESS ONLY.

THE UNDERSIGNED ALSO AGREES THAT HE/SHE SHALL ALSO BE RESPONSIBLE TO PERSONALLY PAY THE COST FOR COLLECTING ANY AMOUNT DUE TO STONE CRAFTERS FROM THE ABOVE NAMED BUSINESS INCLUDING ATTORNEY'S FEES AND INTEREST. INTEREST SHALL BE CHARGED AT THE RATE OF 1-1/2% PER MONTH FOR ALL BALANCES DUE AFTER 30 DAYS, AND ATTORNEY'S FEES SHALL BE CHARGED AT THE RATE OF 25% OF THE AMOUNT DUE.

**PERSONAL GUARANTY** \_\_\_\_\_ **COMPANY NAME** \_\_\_\_\_

**SIGNATURE OF INDIVIDUAL** \_\_\_\_\_ **PRINT NAME & TITLE** \_\_\_\_\_

**RETURN COMPLETED APPLICATION TO:** **STONE CRAFTERS, LLC** **OR FAX IT TO: 609-646-9011**  
**6084 REEGA AVE.**  
**EGG HARBOR TWP, NJ 08234** **OUR PHONE # IS: 609-646-0406**

**INTERNAL USE ONLY:**  
**NOTES:** \_\_\_\_\_  
**DISCOUNT GIVEN:** \_\_\_\_\_ **PM:** \_\_\_\_\_ **APPROVAL DATE:** \_\_\_\_\_