



M. RONDANO, INC.
49 East Avenue
Norwalk, CT 06851
TEL NO. (203) 846-1577
FAX NO. (203) 846-9564

COMMERCIAL CREDIT APPLICATION AND PERSONAL GUARANTEE

ACCOUNT IN NAME (List Full Name of Business)

PHONE NUMBER

ADDRESS (Street required)

NAME OF PRINCIPAL

City, State, Zip Code

FAX NO.

PREVIOUS ADDRESS, IF LESS THAN TWO YEARS

E-MAIL

HOME ADDRESS OF PRINCIPAL, IF DIFFERENT FROM ACCOUNT ADDRESS

TYPE OF BUSINESS: **INDIVIDUAL** **PARTNERSHIP** **CORPORATION**

IF CORPORATION – LIST OFFICERS – IF PARTNERSHIP, LIST PARTNERS:

PRESIDENT OR PARTNER NAME	ADDRESS	PHONE

VICE PRESIDENT OR PARTNER	ADDRESS	PHONE

TREASURER OR PARTNER	ADDRESS	PHONE

SECRETARY OR PARTNER	ADDRESS	PHONE

The information contained within this application is submitted for the purpose of obtaining credit and is warranted by the undersigned to be true and complete. We, the undersigned, understand that all bills will be due and payable upon receipt and are past due after 30 days. Past due accounts are subject to a Finance Charge which is computed by a "Periodic Rate" of 1-1/2% per month on unpaid balances, which is an Annual percentage Rate of 18%. In the event the account opened hereunder becomes delinquent, and said account is placed in the hands of the collector or any attorney to enforce its payment, in whole or in part, and whether or not legal proceedings are instituted, the undersigned, jointly and severally if more than one, agrees to pay all costs and expenses incurred by M. Rondano, Inc. in collecting or otherwise enforcing or attempting to enforce payments.

The undersigned, jointly and severally if more than one, personally and unconditionally guarantee(s) the timely payment of all amounts owed at any time under the above account (whether the account is in the name of the undersigned, a corporation, a partnership or otherwise) and waives any defense based on suretyship or impairment of collateral. Each of the undersigned acknowledge that the account is for commercial purposed and hereby waives his or her right to a notice or hearing under Section 52-278a and 52-278f of the Connecticut General Statues with respect to any attachment or any other prejudgment remedy which M. Rondano, Inc. may desire to use (in any suit or action to enforce the above guarantee).

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Driver's License No.

Driver's License No.

Driver's License No.

Social Security No.

Social Security No.

Social Security No.

Signature

Signature

Signature

Name Printed

Name Printed

Name Printed

Trade References:

1. Name _____ Phone _____

Address _____ Fax _____

Contact _____

2. Name _____ Phone _____

Address _____ Fax _____

Contact _____

3. Name _____ Phone _____

Address _____ Fax _____

Contact _____

ALL PAYMENTS ARE DUE UPON RECEIPT OF INVOICE. ACCOUNTS PAST DUE WILL

BE CHARGED INTEREST AT THE RATE OF 1-1/2% PER MONTH.

BANK INFORMATION:

Checking:

Name: _____

Address: _____

Account Number: _____

Contact: _____

Savings:

Name: _____

Address: _____

Account Number: _____

Contact: _____

Home Mortgage(s):

Name: _____

Address: _____

Account Number: _____

Contact: _____

Construction Mortgage(s):

Name: _____

Address: _____

Account Number: _____

Contact: _____

PROPERTY (If property is held jointly, both signatures are required on front of application)

Do you own your own home? _____ Title to home in name of _____

If jointly, with _____ Date purchased _____

Address of your home _____ Amount of Mortgage _____

Other Real Estate Owned _____ Title in name of _____

Date purchased _____