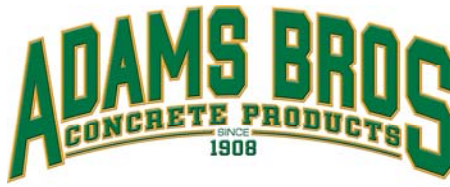


CREDIT APPLICATION



P.O. Box 1270
Zanesville, Ohio 43702-1270
SALES / DISPATCH (740) 452-7566
BILLING OFFICE: (740) 452-1880
Fax (740) 452-7567 Fax (740) 450-4226
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DATE: _____

CREDIT APPLICATION WILL NOT BE ACCEPTED UNLESS ALL REQUIRED FIELDS ARE COMPLETED. THANK YOU!

COMPANY NAME: _____ CONTACT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

TELEPHONE: _____ FAX: _____ E-MAIL: _____

FEDERAL I.D. # _____ OR S.S.N # _____ YEARS IN BUISNESS: _____

TYPE OF BUISNESS: SOLE OWNER PARTNERSHIP CORPORATION LLC.

PRINCIPAL PARTNERS OR COPORATE OFFICERS:

1/NAME: _____ SSN: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____ E-MAIL: _____

2/NAME: _____ SSN: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____ E-MAIL: _____

BANK REFERENCES:

BANK NAME: _____ OFFICER: _____

ADDRESS: _____ ACCOUNT # _____

CITY: _____ STATE: _____ ZIP: _____ TELEPHONE: _____

TRADE REFERENCES:

(DO NOT LIST FINANCIAL INSTITUTIONS; TIRE; FUEL; OIL COMPANIES; CREDIT CARDS; OR DEPARTMENT STORE CHARGES)

1/NAME: _____ CONTACT: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____ ACCT #: _____

2/NAME: _____ CONTACT: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____ ACCT #: _____

3/NAME: _____ CONTACT: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____ ACCT #: _____

ADAMS BROS. CONCRETE PRODUCTS, LTD. CREDIT TERMS ARE NET 30 DAYS FROM INVOICE DATE. ALL ACCOUNTS PAST 30 DAYS WILL BE ASSESSED A FINANCE CHARGE OF 1.5% PER MONTH. IF THE SITUATION ARISES IN WHICH LEGAL ACTION IS NECESSARY TO COLLECT THIS ACCOUNT **ALL COSTS**, INCLUDING BUT NOT LIMITED TO, ATTORNEY FEES AND COURT COSTS WILL BECOME PART OF THE ACCOUNT.

I UNDERSTAND AND AGREE TO ALL OF THE ABOVE TERMS AND CERTIFY THAT ALL INFORMATION ON THIS FORM IS CORRECT.

AUTHORIZED SIGNATURE: _____ TITLE: _____

PRINT NAME: _____ DATE: _____

PLEASE FAX TO (740) 450-4226 ATTENTION: _____ CREDIT DEPARTMENT _____