



VALLEY ICE, LLC
Application for Credit – Commercial

SECTION 1 – APPLICANT			
FULL LEGAL BUSINESS NAME (hereinafter "Applicant")		PHONE NO:	FAX NO:
STREET ADDRESS	CITY	STATE	ZIP CODE
<input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> LIMITED LIABILITY CO. (LLC) <input type="checkbox"/> LIMITED PARTNERSHIP (LP) <input type="checkbox"/> CORPORATION			
IN THE STATE OF	DATE STARTED	FED. TAX ID / SOCIAL SECURITY	BUSINESS LICENSE NO.
TAX EXEMPT <input type="checkbox"/> YES <input type="checkbox"/> NO	MONTHLY CREDIT LIMIT REQUESTED:	DESCRIPTION OF BUSINESS	
(ATTACH CERTIFICATE)			
NAME OF HEAD BOOKKEEPER OR CONTROLLER:			
DIRECT TELEPHONE:		EMAIL:	
ARE FINANCIAL STATEMENTS AVAILABLE FOR THE PAST TWO YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE ATTACH COPIES.			
SECTION 2 – OWNERS, PARTNERS OR OFFICERS			
NAME (FIRST, MIDDLE, LAST)	% OWNERSHIP	TITLE	SOCIAL SECURITY NO.
HOME ADDRESS	TELEPHONE NO.	MOBILE NO.	E-MAIL
NAME (FIRST, MIDDLE, LAST)	% OWNERSHIP	TITLE	SOCIAL SECURITY NO.
HOME ADDRESS	TELEPHONE NO.	MOBILE NO.	E-MAIL
NAME (FIRST, MIDDLE, LAST)	% OWNERSHIP	TITLE	SOCIAL SECURITY NO.
HOME ADDRESS	TELEPHONE NO.	MOBILE NO.	E-MAIL
SECTION 3 – BANKING			
COMMERCIAL BANK	ACCOUNT NO.	PHONE NO.	
ADDRESS	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	LOAN OFFICER	
<p>NOTICE TO APPLICANT: Credit terms are Net 30 days. All invoices are due in full within 30 days from date of invoice. We hereby authorize Valley Ice, LLC to obtain information required to approve credit from my bank as listed on this application. I/We authorize Valley Ice, LLC to make inquiries considered necessary (including requesting reports from consumer reporting agencies and other sources) in evaluating this application, and subsequently, for purposes of reviewing, maintaining or collecting this account. This contract shall be construed under the laws of the State of Virginia, and the parties agree that jurisdiction and venue in any legal action relating to this contract shall be established, instituted, and prosecuted in the Courts of the County of Shenandoah, State of Virginia. To the extent permitted under applicable law, you will be responsible for interest at the rate of 18% per annum on all amounts not paid within terms and for all collection costs and/or attorneys fees equivalent to 25% of the unpaid balance, all court costs and all other fees necessary for collection of any account not paid when due.</p>			
APPLICANT'S SIGNATURE: _____ DATE: _____			
APPLICANT'S SIGNATURE: _____ DATE: _____			
<p>PERSONAL GUARANTY: I/we do hereby unconditionally guaranty payment on all accounts opened and approved by this application. This is a continuing guaranty and shall remain in force until revoked by me or us in writing. Each person who signs this guaranty/application can personally be held jointly and severally liable for all amounts owing without suit having been filed first including interest at the rate of 18% per annum on all amounts not paid within terms and for collection costs and/or attorney's fees equivalent to 25% of the unpaid balance, all court costs and all other fees necessary for collection of any account not paid when due. We hereby authorize Valley Ice, LLC to obtain information required to approve credit from my bank as listed on this application. Guarantor shall be bound personally by all terms and conditions on the attached Disclosure of Terms. Guarantor(s) consent(s) to the jurisdiction of the courts of Shenandoah County, Virginia, over any action filed against guarantor for the collection of the account. By signing this application, I/We authorize Valley Ice, LLC to make inquiries considered necessary (including requesting reports from consumer reporting agencies and other sources) in evaluating this application, and subsequently, for purposes of reviewing, maintaining or collecting this account.</p>			
GUARANTOR: _____		GUARANTOR: _____	
PRINT NAME/DATE: _____		PRINT NAME/DATE: _____	
WITNESS: _____		WITNESS: _____	



DISCLOSURE OF TERMS

30 Day
Commercial
July 1, 2006

OPEN ACCOUNTS:

The terms will be NET 30 DAYS. Otherwise the terms are CASH. We will send you a monthly account statement reflecting your account activity through the end of the each calendar month (billing cycle) at the end of which you had a debit or credit balance or during which a FINANCE CHARGE was imposed. Past due balances will be assessed a FINANCE CHARGE computed by applying a monthly periodic rate of 1.5% (corresponding **ANNUAL PERCENTAGE RATE** 18%) to the adjusted balance of your account. We get the "adjusted balance" by taking the balance you owed at the end of the previous monthly billing cycle and subtracting any unpaid finance charges and the applicable portion of any payments and credits received during the current monthly billing cycle. We also exclude any portion of your balance that was not past due as of the close of the current monthly billing cycle. You can avoid additional Finance Charges if you pay the "Total Due" shown on your current statement in time for us to receive your payment by your next statement closing date, which will be the last day of the calendar month following the closing date shown on the current statement.

To ensure proper credit to your account, please have your account number on your remittance indicating which invoices you are intending to pay.

DELIVERY POLICIES:

Automatic Delivery

All customers in good standing will be on the automatic fill program for delivery, unless otherwise instructed by the customer in writing that they wish to be on a "will-call" basis. Being an automatic fill customer simply means that we monitor your account on a regular basis.

Will-Call Delivery

If you are not on the automatic-fill delivery schedule because of failure to meet credit criteria, or because you choose not to be auto-fill, it is to your advantage to place your order at least three (3) days in advance of actual need. This enables us to make your delivery when we are in the area; avoiding any service charge for emergency delivery.

When you become a customer, please specify on the credit application if you wish to be on the automatic fill or the will-call system for delivery. Failure to initial your selection places your account on an automatic fill status (credit pending).

It has been our intention to clarify our policies for billing and delivering product, however it is not always easy to do this by letter. If you have any questions about our service, please feel free to contact our office.

Note: This disclosure is effective per above date and supersedes all contradictory notifications that might exist on other material, which has been preprinted and might subsequently be received by you.

COLLECTION ACTIONS:

To the extent permitted under applicable law you will be responsible for all reasonable collection costs, including attorney fees and other charges, necessary for collection of any account not paid when due.

Signature: _____

Date: _____