

Northeast Specialty Insulations, Inc. dba Poly-Cel 6 Eastern Road Acton, MA 01720 Phone 508-229-8310 Fax 508-229-8309 Email Poly-Cel@generalinsulation.com

NESI USE ONLY				
BRANCH LOCATION				
BRANCH NUMBER				
ACCOUNT CLASS				
ACCOUNT #				
Sales Representative				
Payment Terms				

☐ New Account ☐ Name/Information Chang	je □ Re-Evalua	ation of Credit		Date:	
Full Legal Title and Trading Name:					
Partners, Officers & Principals of Busin	ess:				
Name:			Name:		
Social Security #			Social Security #		
Home Address:			Home Address:		
Home Phone: Cell Ph	ione:		Home Phone:	Cell Phone:	
E-Mail Address:			E-Mail Address:		
II) Has the corporation or any of the principal	als of the business ever f	iled for Bankru	uptcy or other protection?	YES NO S	tate Filed
DBA Names:	Dun & Brads	treet #			
☐ CORPORATION ☐ LLC ☐ PARTNERSHIP	☐ INDIVIDUAL	FEDERA	AL ID#:	DATE BUSINESS FORMED:	
Billing Information:					
Mailing Address:					
City:		State:	Zip Code	+ 4	
* If the above is a P.O. Box (What is the	physical address of of	fice)			
Street Address:					
City:		State:	Zip Code	+ 4	
Phone:	Fax		Other Phone:		
Accounts Payable Contact:			Position:		
E-mail Address:			Phone number:	Ext:	
E-mail Address for Invoices and Statem	ents:				
Purchasing Contacts:					
Purchasing Contact:			Position:		
Phone:	Fax		Cell Phone:		
E-mail Address:					
Purchasing Contact:			Position:		
Phone:	Fax		Cell Phone:		
E-mail Address:					
CREDIT LIMIT REQUESTED \$		\	Website Address:		
Complete only if Tax Exempt:					
I certify that all material or goods purchased	l by this company from N	lortheast Spec	ialty Insulations, Inc. dba	Poly-Cel after this date is pu	ırchased either
for export, for resale by itself, or for incorpo		-	_		
each order which we shall give provided su	-	-			
Certificate Number:		\$	Signed:		
Title:					

Trade References (Insulation)

NAME:	CONTACT:
ADDRESS:	
CITY-STATE	
ZIP CODE	
ACCOUNT #:	FAX:
PHONE:	E-MAIL:
NAME:	CONTACT:
ADDRESS:	
CITY-STATE	
ZIP CODE	
ACCOUNT #:	FAX:
PHONE:	
Trade Refe	erences (3 Largest Trade Creditors)
NAME:	CONTACT:
ADDRESS:	
CITY-STATE	
ZIP CODE	
ACCOUNT #:	FAX:
PHONE:	E-MAIL:
NAME:	CONTACT:
ADDRESS:	
CITY-STATE	
ZIP CODE	
ACCOUNT #:	FAX:
PHONE:	E-MAIL:
NAME:	CONTACT:
ADDRESS:	
CITY-STATE	
ZIP CODE	
ACCOUNT #:	FAX:
PHONE:	E-MAIL:



Company Promise to Pay

- 1. Company expressly promises to pay Northeast Specialty Insulations, Inc. dba Poly-Cel for service and materials purchased within 30 days of the date of invoice, and to pay NORTHEAST SPECIALTY, INC. DBA POLY-CEL an interest rate of 1.5% per month (18% per annum) or the highest maximum lawful interest rate, whichever is greater, on any outstanding amount unpaid more than 60 days after the invoice date.
- If the account is not paid in full as agreed and NORTHEAST SPECIALTY, INC. DBA POLY-CEL chooses to take legal recourse, Company promises to pay all costs and expenses of collection, including actual attorney's fees and costs and expenses and attorney's fees incurred upon appeal.
- 3. Company agrees to all the terms and conditions of sale of NORTHEAST SPECIALTY, INC. DBA POLY-CEL. Company agrees this application shall in no way interfere with NORTHEAST SPECIALTY, INC. DBA POLY-CEL ability to lien and/or encumber real property for unpaid invoices or product.
- 4. In signing this statement, Company grants to NORTHEAST SPECIALTY, INC. DBA POLY-CEL full authority to check or verify any information provided herein and to obtain credit reports from time to time on Company and any individuals listed on this application. Company consents to an investigation into its credit worthiness and agrees to disseminate credit information about itself to inquiring sources. Company further authorizes its financial institutions to share standard credit information with NORTHEAST SPECIALTY, INC. DBA POLY-CEL during the initial credit investigation process and routine credit updates.
- 5. Company waves all rights related to venue it may have under any applicable state or federal law, and further agrees to submit to the jurisdiction of any Court in the United States where a collection action may be brought.
- 6. Company certifies that all the information contained in this application is correct, true, and accurate.
- 7. Company promises to send NORTHEAST SPECIALTY, INC. DBA POLY-CEL written notice of any changes in the form of ownership of application's business within five (5) days of such changes.
- 8. NORTHEAST SPECIALTY, INC. DBA POLY-CEL may stop the shipment or supply of any materials, when it, in its sole discretion, determines that Company is in breach of this Agreement or NORTHEAST SPECIALTY, INC. DBA POLY-CEL has insecurity in respect to Company's creditworthiness, until payment is made and any dispute or insecurity has been resolved. NORTHEAST SPECIALTY, INC. DBA POLY-CEL may also raise and lower credit limits, at its sole discretion, without notice.

Ow	Owner/Officer Signature RequiredTitle							
	Personal Commitment to Fulfill Trade Obligations							
1.	 This agreement is made is consideration of NORTHEAST SPECIALTY, INC. DBA POLY-CEL selling and on NORTHEAST SPECIALTY, INC. DBA POLY-CEL's usual and customary terms of sale, such goods, was Company's authorized purchaser or representative may, from time to time, order or select. 							
2.								
3.	This is intended to be a continuing Guaranty applying to all sales made by NORTHEAST SPECIALTY, INC. DBA POLY-CEL to the aforesaid and shall not be revoked by the death of the Guarantor(s). This shall remain in full force and effect until the Guarantor(s) or the Executors or Administrators shall have given notice in writing to make no further advances on NORTHEAST SPECIALTY, INC. DBA POLY-CEL or any change in the form of the Company's business or ownership within five days of such change.							
4.	4. Guarantor(s) understand and agree that their liability under this Guarantee shall be UNLIMITED.							
5.								
6.	6. Guarantor(s) waive all rights relating to venue they may have under any applicable state or federal law, and jurisdiction of any Court in the United States where a collection action may be brought.	agree to submit to the						
	IN WITNESS WHEREOF, the undersigned hereby execute(s) this Personal Guarantee, thisday of	2						
	Name (Please Print) Signature Individually							
	Name (Please Print) Signature Individually							
	Name (Please Print) Signature Individually							

PRINCIPALS AND THEIR SPOUSES SHOULD SIGN AS INDIVIDUALS CORPORATE TITLES ARE TO BE AVOIDED AS THEY ARE NOT APPLICABLE