



# MASON

Mailing Address: Mason Equity Group P.O. Box 14460 Columbus, Ohio 43214

**CUSTOMER INFORMATION****Application Fee: \$30**

Applicant's Legal Business Name		DBA		AP Contact Name	
Address			City		State Zip
Billing Address (if different from above)			City		State Zip
Phone Number		Fax Number		Email Address Web Address	
Business Entity is a		State of Incorporation		Year Incorporated Tax ID #	
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership		<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Joint Venture			
Years at Present Location		Pending Litigation Against You or Business?		Plaintiff? Amount of Controversy	
<input type="checkbox"/> Own <input type="checkbox"/> Lease		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Workers Compensation Number			OSHA 300 Log Attached? <input type="checkbox"/> Attached <input type="checkbox"/> Previously Submitted		

Parent Company		Does Parent Company Guarantee Debt?		Parent Tax ID # D&B Number (DUNS)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Parent Company Address			City		State Zip
Emergency Contact Name:		Emergency Contact Number:		Relationship:	

**Owner(s)/Partner(s)/Member(s)/Executive(s)**

Position	Name	Home Address/City/State/Zip	S.S. Number	Phone Number

**Bank References**

Bank Name	Branch	Phone Number	Account Number
1.			
2.			

**Trade References**

Name	Address/City/State/Zip	Phone
1.		
2.		
3.		

**Confirmation of Information Accuracy and Release of Authority to Verify**

The undersigned hereby certifies that all information in this credit application is correct. The information included in this credit application is for use by Mason Equity Group, LLC in determining whether or not to extend credit to the applicant. The undersigned understands that Mason Equity Group may also utilize other sources of credit information that it considers necessary in making this determination. Payment Terms: If credit is extended, the undersigned agrees to pay all charges incurred by Mason Equity Group and/or third party, in the collection of the undersigned's account, including, but not limited to, court costs and attorney fees. The undersigned understands that Mason Equity Group's terms are NET DUE UPON RECEIPT and are subject to a finance charge 30 days from invoice date.

If the undersigned is signing on behalf of a corporation or partnership, the undersigned has authority to bind the corporation/partnership.

_____	_____
Applicant Name - if applicant is a partnership, application must be signed by a partner	Date
by _____	it's _____
Applicant Signature	Title - Authorized officer or representative

**Continuing Personal Guaranty**

The undersigned, jointly and severally, hereby unconditionally guarantee the prompt and complete payment of any and all obligations of said Applicant which hav in the past or may in the future be owing to Mason Equity Group on open account or otherwise, including without limitation service charges and attorney fees. The undersigned warrants that they have read and agree to the above terms and conditions, and that only the full payment of all outstanding balances will discharge the undersigned's liability hereunder.

_____	_____
Guarantor's Name - An Individual, No Title	Guarantor's Street Address
_____	_____
Guarantor's Signature - An Individual, No Title	Guarantor's Social Security Number
_____	_____
Date	Guarantor's Date Of Birth

NC-100 Rev. 9/18/2008

**Corporate Guaranty**

Guarantor hereby unconditionally and absolutely guarantees the punctual payment of invoices as and when due of Debtor's payment obligations arising under any agreement, as such agreement may be amended or modified from time to time. Guarantor's obligations and liability under this guaranty shall be limited to payment obligations only. The liability of the Guarantor under this guaranty shall be absolute and unconditional.

_____	_____
Company Name	Authorized Signature
_____	_____
Company's Street Address	Print Name
_____	_____
Date	Signor's Title