

CUSTOMER APPLICATION

Name of Client that you are applying for credit with: **BURTON COMPANIES, LLC**

COMPANY INFORMATION

Legal Name: _____ Fed ID #: _____

DBA: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ County/Parish: _____ Website: _____

Mailing Address
(If different from above): _____ City: _____ State: _____ Zip Code: _____

DAILY CONTACT PERSON Name: _____ Title: _____

Phone: _____ Mobile: _____ Fax: _____ Email: _____

FORM OF BUSINESS: Sole Proprietor Partnership Limited Partnership LLC Corporation Business Start Date: _____

STATE or JURISDICTION OF INCORPORATION / ORGANIZATION: _____

Home Office / Parent Company: _____ City: _____ State: _____

Bankruptcy filings (company or any principals)?: Yes No If yes, which type(s) and date(s): _____

Purchase Order Required? Yes No Name of Authorized Person to Issue Purchase Orders: _____

Are you listed with Dun & Bradstreet? Yes No #: _____

Motor Carrier #: _____ DOT #: _____

PRINCIPALS & SHAREHOLDERS

NAME (full legal)	TITLE	ADDRESS	PHONE	EMAIL ADDRESS

CREDIT REFERENCES

BANK NAME	ADDRESS	ACCOUNT #	BANK OFFICER	PHONE

TRADE CREDITORS

NAME OF COMPANY	ADDRESS	EMAIL	PHONE	FAX

The Company applying for credit in this Application ("Company") has requested credit from the clients listed above and any other client (collectively, "Clients") from whom ProBilling & Funding Service, a division of Peoples Bank of Alabama, may from time to time purchase accounts receivable. Company is furnishing the information and agreements herein solely at the clients request to obtain credit from clients and understand that ProBilling & Funding Service may refuse to purchase accounts of the Company from any of the clients at any time without notice to Company or any other party. All parties listed above, and with or without notice to Company, any client may receive a copy of this application and all such parties are authorized to release credit concerning Company to ProBilling & Funding Service. Company understands that all accounts are due on the 15th day of the calendar month after the calendar month of the statement date. If ProBilling & Funding Service, after Company's refusal to pay, collects through an attorney any indebtedness related to any client account assigned to ProBilling & Funding Service, the Company shall pay all collection costs, including a reasonable attorney's fee. Payments accepted in U.S. funds only.

Signature / Title _____ Print Name _____ Date _____

PERSONAL GUARANTY

The undersigned individually, jointly and severally and unconditionally guarantee the payment when due of all invoices/accounts purchased by ProBilling & Funding Service, a division of Peoples Bank of Alabama, from any Client with the above applicant or any other applicant with common ownership. The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guaranty hereby consents to and authorizes the use of consumer credit report on the undersigned, by ProBilling & Funding Service from time to time as may be needed in the credit evaluation process.

Signature _____ Print Name _____ Date _____

Social Security #

PLEASE FORWARD COMPLETED CUSTOMER APPLICATION TO: credit@probfs.com or Fax (256) 301-0238

PAYMENTS REMIT TO ADDRESS: P.O. Box 2222, Decatur, AL 35609-2222

p 844.277.6237 f 256.301.0238