# Raleigh Mine & Industrial Supply, Inc.

Rt 2 Box 172 Bluefield, VA 24605

#### DBA DS PARTS

Telephone 276-322-3119 Fax 276-322-3106

#### CREDIT APPLICATION

The following information must be completed in full and will be held in the strictest of confidence. APPLICANT NAME: \_\_\_\_\_ ADDRESS:\_\_\_\_\_ TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ PERSONS TO CONTACT: \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: \_\_\_\_ \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: \_\_\_\_ \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: \_\_\_\_ Does customer use P.O. numbers? \_\_\_\_\_YES \_\_\_\_NO If customer has a resale certificate or direct pay permit, place that certificate number here: \_\_\_\_\_ and attach a signed certificate to application. Does company pay by invoice? \_\_\_\_\_YES \_\_\_\_\_NO or by statement \_\_\_\_\_YES \_\_\_\_\_NO What day(s) does company pay payables? \_\_\_\_Corporation \_\_\_\_ Partnership \_\_\_\_Individual OWNERSHIP: Check here if incorporated within the last 12 months If corporation, please complete the following: STATE OF CORPORATION \_\_\_\_\_ Public \_\_ Private \_\_\_\_\_ Is corporation a subsidiary? \_\_\_\_Yes \_\_\_ No If public, give trading symbol \_\_\_\_\_ President of Parent Corporation Name of Parent Corporation \_\_\_\_\_ Address of Parent Corporation (Street No. or P. O. Box) City State Zip Area Code Telephone 1

Parent Corporation is incorporated in state of: \_\_\_\_\_\_\_

Years applicant has been a subsidiary: \_\_\_\_\_\_

Percent of stock owned by Parent Company: \_\_\_\_\_\_

# CREDIT APPLICATION - Raleigh Mine & industrial Supply, Inc. dba DS Parts

	Mailing A	ddress	Social Security #	Telephone #	Title
Name	Mailing A	ddress	Social Security #	Telephone #	Title
Name	Mailing A	ddress	Social Security #	Telephone #	Title
If not a corp	ooration, explain:				
Dlagge ligt t	hvoo tuado vatavanaas (i	naluda addua	eggg and talanhana	numborg)	
Please list t	hree trade references (i	nciude addre	sses and telephone	e numbers).	
Name	Addr	ess	Telephone		
Name	Addr	ess	Telephons		
Name	Addr	ess		Telephone	
Please list s	ship to addresses and tel	ephone numb	oers.		
Name	Addr	ess	Telephone		
	Addr	ess		Telephone	
Name					
Name Name	Addr			Telephone	

## CREDIT APPLICATION - Raleigh Mine & Industrial Supply, Inc. dba DS Parts

N:

month interest. The undersigned authorizes a on this application to furnish information and agrees to pay all collection costs, court cost, a Applicant agrees that this contract for credit is jurisdiction of that county.	authorizes the checking of credit. The unde	rsigned lances.
Credit terms are 30 days from date of invoice.	-	
Street or PO Box	City State	Zip
ADDRESS		
NAME		
For Confirmation:	Source	
source and person ( banker, broker, CPA, etc.  \$ Amount		
If there are other sources of income to your co		er, please list the income
Your Company's Annual Earnings: _		
Name of Contact at Coal Buyer's Office	ce:	
Phone Number of Coal Buyer's Office		
Address of Coal Buyer's Office:		
Name of Coal Buyer's Office:		
Equipment Leased, Owned, or Mortga	aged:	
Type of Equipment:		
Number of Years in Coal Production:	Number of Years in	n Business:
Who Buys Coal:	Where Hauled To:	
Lease or Own Coal:	Lease, From Whom	1:
Tonnage Last 12 Months:	Name of Supt/Gen	Mgr:

### ABSOLUTE GUARANTY

I (We), the undersigned,	, residing at
-	, for and in
consideration of Raleigh Mine & Industrial Sup	oply Inc. dba D S Parts, and its subsidiaries (hereinafter referred
to as the "Seller") extending credit at my reque	est to
and it	s affiliates (hereinafter referred to as the "Customer")
hereby personally guarantee to the "Seller" pa	ayment of "Customer" account balance presently
owed and/or incurred in the future, and I herel	by agree to bind myself to pay said "Seller" on
demand any balance which may become due	to the "Seller" when "Customer" shall fail to pay
the same for any reason. It is understood that	t this guaranty shall be unlimited, continuing and an
absolute guaranty for such indebtedness of "C	Customer". I do hereby waive notice of default,
	ollect from any other party or "Customer". I further ention of credit. In the event of any default by the
"Customer" the undersigned guarantors agree	e to pay interest, cost and all expenses, including
reasonable attorney fees, incidental to the enf	orcement and collection of any amounts due
pursuant to this guaranty. Guarantors agree t	he forum for any litigation pursuant to the guaranty
shall be in Raleigh County, West Virginia. Thi	s guaranty shall be governed by and construed in
accordance with the laws of West Virginia. A	list of relevant subsidiaries of "Seller" may be
obtained from the controller of the corporation	To cancel any future obligation of any guarantor
a written notice of withdrawal of guaranty by e	each guarantor must be received by the controller of the "Seller".
Guarantor	Date
SS#	Date of Birth
Address	
Witness	Date
Spouse:	Date
SS#	Date
Address	
Witness	Date
STATE OF	
COUNTY OF	
I,	, a notary public in and for said state (or county);
do hereby certify that	,whose name is
signed to the writing above, has this day ackn	owledged the same before me.
Given under my hand thisday of	,20
My commission expires	
Notary Public	