Eastern States Mine Supply Company

2816 Spruce River Rd., Rt. #17 Madison, WV 25130

Telephone 304-369-6010 Fax 304-369-5589

CREDIT APPLICATION

The following information must be completed in full and will be held in the strictest of confidence.

APPLICANT NAME:

ADDRESS:

TITLE: PHONE: TITLE: PHONE: TITLE: PHONE: TITLE: PHONE: Does customer use P.O. numbers?YESNO If customer has a resale certificate or direct pay permit, place that certificate number here: and attach a signed certificate to application.	TELEPHONE:	FAX: _	
TITLE: PHONE: TITLE: PHONE: Does customer use P.O. numbers?YESNO If customer has a resale certificate or direct pay permit, place that certificate number here:	PERSONS TO CONTACT:		
TITLE: PHONE: Does customer use P.O. numbers?YESNO If customer has a resale certificate or direct pay permit, place that certificate number here: and attach a signed certificate to application.		TITLE:	PHONE:
Does customer use P.O. numbers?YESNO If customer has a resale certificate or direct pay permit, place that certificate number here: and attach a signed certificate to application.		TITLE:	PHONE:
If customer has a resale certificate or direct pay permit, place that certificate number here: and attach a signed certificate to application.		TITLE:	PHONE:
Does company pay by invoice? YES NO or by statement YES NO	If customer has a resale certificate or dire	ect pay permit, place that c	
What day(s) does company pay payables?	Does company pay by invoice?YE	ESNO or by state	ementYESNC

Government Agency

If corporation, please complete the following:

STATE OF CORPORT If public, give trading s					Private _ subsidiary?	N	lo
	poration						
Address of Parent Corp	oration (Street No. or P	. O. Box)					
Street Parent Corporation is in Years applicant has been Percent of stock owned	en a subsidiary:		r	Area Code			_

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Name Name If not a corporation	Mailing Address Mailing Address	Social Security # Social Security #	Telephone #	Title	
	Mailing Address	Social Security #		Title	
If not a corporation			Telephone #	Title	
	on, explain:				
Please list three	trade references (include ad	dresses and telephone	numbers).		
Name	Address		Telephone		
Name	Address	Telephone			
 Name	Address Telephone				
Please list ship to	o addresses and telephone nu	imbers.	Telephone		
	Address		Telephons		
Name			Тетернон		

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All Coal Producers are REQUIRED To Complete The Following Section All information will be held in strictest confidence.

Location of Mine:	What Seam of Coal:				
Tonnage Last 12 Months:	Name of Supt/Gen M	/Igr:			
Lease or Own Coal:					
Who Buys Coal: Where Hauled To:					
Number of Years in Coal Production: Number of Years in Business					
Type of Equipment:					
Equipment Leased, Owned, or Mortgaged	d:				
Name of Coal Buyer's Office:					
Address of Coal Buyer's Office:					
Phone Number of Coal Buyer's Office:					
Name of Contact at Coal Buyer's Office:					
Your Company's Annual Earnings: If there are other sources of income to your comp		place list the			
income source and person (banker, broker, CPA,	, etc.) to whom we can write for confirmati				
Amount	Source				
For Confirmation: NAME					
ADDRESS					
Street or PO Box	City State	Zip			
Credit terms are 30 days from date of invoice. O month interest. The undersigned authorizes and non this application to furnish information and autagrees to pay all collection costs, court cost, and applicant agrees that this contract for credit is majurisdiction of that county.	releases all banks, persons and companies l horizes the checking of credit. The unders legal fees incurred to collect deliquent bala	listed signed ances.			
Signature	Title	Date			

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ABSOLUTE GUARANTY

I (We), the undersigned,	
	, for and in
consideration of Eastern States Mine Supply Co.	., and its subsidiaries (hereinafter referred
to as the "Seller") extending credit at my request	
and its a	affiliates (hereinafter referred to as the "Customer")
hereby personally guarantee to the "Seller" payr	ment of "Customer" account balance presently
owed and/or incurred in the future, and I hereby a	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 th	is guaranty shall be unlimited, continuing and an
absolute guaranty for such indebtedness of "Cus	stomer". I do hereby waive notice of default,
nonpayment, notice thereof and attempts to colle	ect from any other party or "Customer". I further
consent to any modification or renewal of extention	on of credit. In the event of any default by the
"Customer" the undersigned guarantors agree to	pay interest, cost and all expenses, including
reasonable attorney fees, incidental to the enforce	cement and collection of any amounts due
pursuant to this guaranty. Guarantors agree the	forum for any litigation pursuant to the guaranty
shall be in Raleigh County, West Virginia. This g	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. T	To cancel any future obligation of any guarantor
a written notice of withdrawal of guaranty by each	h 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	
1	, a notary public in and for said state (or county);
do hereby certify that	
signed to the writing above, has this day acknow	
signed to the writing above, has this day acknow	leaged the same before me.
Given under my hand thisday of	,20
My commission expires	
Notary Public	