

Kenstan Lock Company
101 Commercial Street
Suite 100
Plainview, NY 11803
Phone: 516-576-9090
Fax: 516-576-0100
E-mail **araye@kenstan.com**

Name of company:* _____ (*Required)

Type of business: * _____

Street:* _____

City:* _____ State:* _____ Zip:* _____

Phone#:* _____ Fax #: * _____

Owner's name:* _____ Federal Id#:* _____

Accounts Payable Manager:* _____

E-Mail Address:* _____

Phone #:* _____

Purchasing Manager:* _____

E-Mail Address:* _____

Phone #:* _____

Credit Card Account Number:* _____

Expiration Date:* _____

*Company is: ____ Corp. ____ Partnership: ____ Self-Proprietor Date Established ____

Kenstan Lock requires four (4) trade references:

1. **Company Name:** * _____ **Account #:** _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: * _____ Fax: * _____ (*Required)

E-Mail Address:* _____

2. **Company Name:** * _____ **Account #:** _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: * _____ Fax: * _____ (*Required)

E-Mail Address:* _____

3. **Company Name:** * _____ **Account #:** _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: * _____ Fax: * _____ (*Required)

E-Mail Address:* _____

4. **Company Name:** * _____ **Account #:** _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: * _____ Fax: * _____ (*Required)

E-Mail Address:* _____

I hereby authorize the above references to release any information necessary to assist in establishing a line of credit. We understand that upon failure to meet **Kenstan's Payment terms of net 30 days**, we (the purchaser) will be responsible for all collection costs and attorney fees if this invoice is not paid pursuant to its terms and conditions. I hereby warrant and affirm, based on my review of our records, that all information is correct and accurate and will be used to induce Kenstan to supply us goods on credit.

President of the company must sign

Signature:* _____ **Date:** * _____

Print:* _____

Personal Guarantee Kenstan Lock Company

In consideration for Kenstan Lock Company extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to Kenstan Lock Company by the business identified below whether the sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between Kenstan Lock Company and the business. Kenstan Lock Company shall not be obliged to notify the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by Kenstan Lock Company.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt is received by Kenstan Lock Company. Said notice shall specify the date on which this guaranty is to be terminated; said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date _____ Name _____
(Name of person guaranteeing payment)

Home Address _____

Home Phone# _____ SS# _____

Signature of the person guaranteeing payment _____

Name of Business whose account is guaranteed _____