

To: New Voyager Industries, Inc. Customers

From: Voyager Industries, Inc. Accounting Department

Please complete the following 3 page Credit Application for Voyager Industries, Inc. Follow the instructions below for returning the completed application.

** TERMS ARE SUBJECT TO CREDIT APPROVAL **

Voyager Industries, Inc. must have a signed and completed credit application on file. Credit applications may be emailed, faxed, or mailed. For fastest processing of your credit application, please send completed form via e-mail to the e-mail address listed below. Please include the words "Credit application" in the subject line. A signed copy, mailed or faxed, must follow all e-mailed applications.

Voyager Industries, Inc.
Attn: Credit Department
PO Box 566
Brandon, MN 56315-0566

Fax Number: (320) 834-4745

E-mail: <u>accounting@voyager-industries.com</u>

If you have questions, please contact: Karen Root, Controller Voyager Industries, Inc. 320-524-2268 karenr@voyager-industries.com

Brundon, MN 5631-50566 Phone: (220) 834-4340 Fax: (320) 834-4340 (Page 1 of 3) UPage 1 of 3 (Page 1 of 3) UPage 1 of 3 UPa	Nev	Account Information		
PO Box 566 (Please complete fully) Brandon, MN 56315-0566 Prone: (320) 834-4349 (Page 1 of 3) Business Name:	Voyager Industries, Inc.	Confidential Credit Informatio	n	
Phone: (320) 834-4439 (Page 1 of 3) Business Name:	PO Box 566	(Please complete fully)		
Fax: (320) 834-4439 (Page 1 of 3) Business Name: Billing Address: City Street Address City Street Address City Street Address City Street Address City State City State City State City City Code City State City City City City City City City City	-			
Business Name:		$(\mathbf{D}_{\alpha\alpha\alpha}, 1_{\alpha\beta}, \mathbf{f}_{\alpha\beta})$		
Billing Address: Street Address City State Zip Code Ship to Address: City State Zip Code Description of Business: Business Type: Corporation Partnership Sole Proprietor Number of Years in Business: Business Type: Corporation Partnership Sole Proprietor Number of Years in Business: ACCOUNTS PAYABLE Contact Person: Name Phone Number Ext Fax Number Functionary Y N (circle one) Email Address Contact Person: Email Address E-Invoicing Y N (circle one) Email Address(es) Contact Person: Mame Phone Number Ext Fax Number ALL OWNERS AND/OR COMPANY OFFICERS* 1. Name Tate SSN Home Street Address City State Zip Code 2. Name Tate SSN Home Street Address City State Zip Code 3. Name Tate SSN	Fax: (320) 834-4439	(<i>ruge 1 0j 5</i>)		
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	3			
Home Street Address City State Zin Code	Name	Title		SSN
	Home Street Address	City	State	Zip Code

* Please attach a separate sheet for any additional owners.

SUPPLIER REFERENCES

Name		Phone Nun	ıber	Email (or Fax)
Street Address	Cit	ty	State	Zip Code
Name		Phone Num	ıber	Email (or Fa
Street Address	Cia	ty	State	Zip Code
Name		Phone Num	ıber	Email (or Fa
Street Address	Cia	ty	State	Zip Code
Name		Phone Num	ıber	Email (or Fa
Street Address Mortgage holder/Landlord	Ci	ty	State	Zip Code
				Phone Numbe
Street Address	Ci	4	State	Zip Code
Financial Institution Name Street Address	Ci	ty	State	Zip Code
	Cit	-		-
Loan Officer's Name		Phone Number	Ext	Email (or Fa
Financial Institution Name				
Street Address	Ci	ty	State	Zip Code
Loan Officer's Name		Phone Number	Ext	Email (or Fa
JNS Number:				
pected monthly purchases: \$	Line of Credit l	Requested: \$		
te Tax Exemption Number:	(please en	close copy o	f form)	
e financial statements available for review? Yes	No			
s the firm or any of it's principals ever been Bankrup	t? Yes	No		
Yes, explain				
r es, explain				

Standard Credit Terms for Voyager Industries, Inc.

- 1. Standard terms are payment upon delivery of product. In some cases credit may be established.
- 2. If credit is established. Payment is expected within terms.
- 3. Further orders will not be accepted and shipments will not be made in the event account is past due.

Voyager Industries, Inc. Credit Application (*Page 3 of 3*)

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. I/we further agree that Voyager Industries, Inc. may contact our banks, vendors, or principals to determine our credit and financial responsibility, now or at any time in the future as is necessary.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Name of Business			
Print Name	Title	Signature	
Print Name	Title	Signature	

Personal Guarantee

In consideration for Voyager Industries, Inc. 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 Voyager Industries, Inc.by the business identified below whether said 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 Voyager Industries, Inc. and the business. Voyager Industries, Inc. shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by Voyager Industries, Inc.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by Voyager Industries, Inc. 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, NO TITLE)
Home address	
Home Phone #	SS#
Signature of person guaranteeing payr	nent
Name of Business whose account is g	uaranteed
CRE	DIT DEPARTMENT USE ONLY
Date: Line of Credit Approved / Denied Comments:	Amount \$