

CONFIDENTIAL BUSINESS CREDIT APPLICATION

WE HEREBY APPLY FOR A LINE OF CREDIT WITH POLAR TECH INDUSTRIES, INC. FOR THIS PURPOSE
WE SUBMIT THE FOLLOWING FOR YOUR CONSIDERATION. Fax#815-784-9009

Billing Address	Shipping Address		
Name: _____	Name: _____		
Street or P.O Box: _____	Street: _____		
City/State/Zip: _____	City/State/Zip: _____		
Telephone/Fax No's: _____	Telephone: _____		
___ Partnership ___ Proprietorship ___ Limited Partnership ___ Corporation (indicate state of corporation and date established _____ State _____ Date Established Type Of Business _____			
<u>Principals:</u>			
_____ Name	_____ Name	_____ Name	
_____ Title	_____ Title	_____ Title	
<u>References:</u>			
Company Name:	Full Address And Zip Code	Phone/Fax No's	Contact:
1. _____			
2. _____			
3. _____			
Bank Name	Full Address And Zip Code	Phone/Fax No's	Account Officer

This is our authorization to Polar Tech Industries, Inc. to contact the references provided so that information may be obtained to consider granting credit privileges to us. We believe that our company is financially able to meet any commitments we have made and we intend to pay promptly in accordance with payment terms indicated on Polar Tech Industries, Inc. invoices. Should those terms now or at any future date include a service charge for a late payment, we agree to pay such charges if incurred.

Signed: _____

Date: _____

Title: _____

(revised 3/17/04)

