

CON-AGG

COMPANIES

Razorback Concrete - Razorrock Materials Company
2604 N. Stadium Blvd Columbia, MO 65202-1271
Office No. 573-447-0100 Fax No. 573-446-0147

APPLICATION FOR CREDIT

Account Number _____

Date: _____

Billing Address (if different than the mailing address)

Name of Firm or Individual

Name of Firm or Individual

Address (if PO Box please include street address)

Address (if PO Box please include street address)

City _____

State _____

Zip Code _____

City _____

State _____

Zip Code _____

Telephone No. _____

Cell Phone No. _____

Fax No. _____

PO's Required? Yes ___ No ___

Please check one of the following:

Individual ___ Corporation ___ Proprietorship ___ Partnership ___ LLC ___ Other ___

Social Security No.

OR

Federal ID No.

Type of business _____

Years in business _____

Note: If less than 7 years provide SSN above

(1) _____

Name(s) of Principal(s)

Residence Address

Phone No.

(2) _____

Contact person responsible for the account: _____

Title

Telephone No.

List (3) Trade References: (For expedited handling, please include Fax numbers)

(1) _____

Name

Telephone No.

Email Address or Fax No.

(2) _____

Name

Telephone No.

Email Address or Fax No.

(3) _____

Name

Telephone No.

Email Address or Fax No.

Bank References

Lending Institution

Telephone No.

Email Address or Fax No.

Loan Officer _____

Credit Requested for Project: _____

Applicant agrees that payment of all amounts due and owing to Con-Agg Companies, LLC dba Razorback Concrete or Razorrock Materials Company shall be made not later than thirty (30) days after the date shown on each invoice. Applicant agrees that this agreement and the personal guarantee shall be subject to and governed by the laws of the State of Arkansas. Further, in the event any dispute results in litigation between the parties, Applicant and Con-Agg Companies, LLC dba Razorback Concrete or Razorrock Materials Company consent irrevocably to the jurisdiction of any state or federal court sitting in Crittenden County, Arkansas. Upon default in payment of Applicant's account(s) and demand by Razorback's attorneys, Applicant and any Guarantor agree that Applicant and any Guarantor shall be liable for Con-Agg Companies, LLC dba Razorback Concrete or Razorrock Materials Company attorney fees, and, if any legal action or other proceeding is brought for the enforcement of this agreement, or because of any alleged dispute, breach, default or misrepresentation in connection with any provisions of this agreement and such action is successful, the prevailing party shall be entitled to recover reasonable attorney's fees (in no event less than one-third of the amount in dispute), court costs and all reasonable expenses from the unsuccessful parties, even if no action or proceeding in addition to any other relief to which such party may be entitled. Applicant agrees to pay interest on each invoice at the rate of 6.0% per annum. Applicant agrees that Con-Agg Companies, LLC dba Razorback Concrete or Razorrock Materials Company is authorized to obtain a consumer report and make inquiry on the applicant and any person signing this application and personal guarantee.

I, (We), certify the above information is complete, truthful, and is provided for the purpose of obtaining credit. Further, applicant, its agents and guarantors I, agree to all terms set out above. I, (We), authorize the release of credit information to Con-Agg Companies, LLC dba Razorback Concrete & Razorrock Materials Company.

Authorized Signature

Title

Please Print Name of Authorized Signature

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Date: _____ Business Name: _____
Contact Name: _____
Fax Number: _____

Would you be kind enough to furnish us with credit information on:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____

We would like to extend credit to this individual. They have given you as a credit reference.
This information is strictly confidential.

Date account opened: _____ Terms: _____
High Balance: _____ Present Balance: _____ Amt. Past Due: _____
Date of last sale: _____ Amount of last sale: _____
Payment Record: Discount _____ Prompt _____ Slow _____ Days _____
Comments: _____

----- FOR BANK USE ONLY -----

Type of Account: Checking _____ Savings _____
High Balance _____ Low Balance _____

Type of Account: Checking _____ Savings _____
High Balance _____ Low Balance _____

Type of Account: Checking _____ Savings _____
High Balance _____ Low Balance _____

Loan Experience: Max Loan \$ _____ Secured _____ Unsecured _____

How long doing business: _____ Comments: _____

Customer Signature: _____

For release of credit information

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PERSONAL GUARANTEE

For consideration for credit by Con-Agg Companies, LLC dba Razorback Concrete & Razorrock Materials Company to the Applicant, whether the Applicant is an individual, proprietorship, partnership, corporation, or other entity, the undersigned Guarantor(s) guarantee payment, when due, or all Applicant's accounts and further, agrees to be bound as Guarantor to the Terms of Credit Agreement set out on the first page of the Application. The undersigned Guarantor(s) waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment, and demand for payment on applicant, protest and notice to undersigned Guarantor or Guarantors of dishonor or default by applicant or with respect to any security held by Con-Agg Companies, LLC dba Razorback Concrete or Razorrock Matierals Company, extension of time of payment to applicant, acceptance of partial payment or partial compromise, all other notices to which the guarantor(s) may be entitled. Absent written permission by creditor, this personal guarantee may not be revoked.

Dated _____ this day _____ of , 20_____

Business Name or Applicant's Name

By: _____
Signature of Owner or Applicant Printed Name

Guarantor: _____
President Signature Printed Name

Guarantor: _____
Secretary/Board Member Printed Name

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E-INVOICING/STATEMENTS

In an effort to better serve you as our customer of Razorback Concrete and/or Razorrock Materials Company; you have the option to have your Invoices and Statements electronically emailed to you.

If you or your company would prefer to receive your Invoices and Statements by email, please complete the information below.

Account Name: _____

Phone Number: _____

E-mail Address: _____