WATERSTONE FAUCETS, LLC
AGREEMENT AND APPLICATION FOR CREDIT

REGIONAL MANAGER USE ONLY:

SUBMITTED BY:

REGIONAL MGR. _____ TERRITORY MGR. _____ CUSTOMER LEVEL:_____

COMPANY: _____ PRIMARY CONTACT:_____ EMAIL: _____

SHIP TO: *Always Ship Complete*	***BILL TO:*** *Same as Shipping Address*
ADDRESS _____	ADDRESS _____
CITY _____	CITY _____
STATE _____ ZIP _____ UPS ACCT. # _____	STATE _____ ZIP _____

PHONE _____ FAX _____ REQUESTED CREDIT LIMIT _____

ACCOUNTS PAYABLE CONTACT _____ PHONE/EXT:_____

TYPE OF BUSINESS: CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP

YEARS IN OPERATION _____ FEDERAL ID # _____ RESALE # _____

****PLEASE INCLUDE A COMPLETED RESALE CERTIFICATE****

LIST ALL OWNERS, OFFICERS, OR GENERAL PARTNERS (use separate sheet if necessary)

1. NAME _____
   TITLE_____ ADDRESS _____
   CITY _____ STATE _____ ZIP _____
   PHONE_____ SOCIAL SECURITY NUMBER _____

2. NAME _____
   TITLE_____ ADDRESS _____
   CITY _____ STATE _____ ZIP _____
   PHONE_____ SOCIAL SECURITY NUMBER _____

3. NAME _____
   TITLE_____ ADDRESS _____
   CITY _____ STATE _____ ZIP _____
   PHONE_____ SOCIAL SECURITY NUMBER _____

CURRENT TRADE REFERENCES (list only active vendors)

1. VENDOR NAME _____
   PHONE _____ FAX _____
   ADDRESS _____
   CITY _____ STATE _____ ZIP _____

CURRENT TRADE REFERENCES (Cont.)

2. VENDOR NAME _____

    PHONE _____ FAX _____

    ADDRESS _____

    CITY _____ STATE _____ ZIP _____

3. VENDOR NAME _____

    PHONE _____ FAX _____

    ADDRESS _____

    CITY _____ STATE _____ ZIP _____

4. VENDOR NAME _____

    PHONE _____ FAX _____

    ADDRESS _____

    CITY _____ STATE _____ ZIP _____

5. VENDOR NAME _____

    PHONE _____ FAX _____

    ADDRESS _____

    CITY _____ STATE _____ ZIP _____

The applicant authorizes the use of a facsimile of this document as verification of release of information by references to the Seller. Applicant agrees to pay for all goods purchased in compliance with the prevailing terms of the Seller. It is further understood that all past due accounts will bear a service charge not to exceed 1-1/2% per month or 18% per annum on any delinquent account, collection fees and/or attorney fees. This shall be an open and continuing guarantee, not withstanding any changes, removals extensions or the like, granted by the Seller. This agreement shall be treated as though it were executed and to have been performed at Murrieta, CA. Any action relating to this agreement shall be instituted and prosecuted in the courts of Riverside, CA. If a corporation, this agreement must be signed by an officer. If a partnership, this agreement and application must be signed by all general partners. I have read and agree to all terms and conditions of sale as set forth in this application.

PRINT NAME _____ SIGNATURE _____ DATE _____

   Owner   Officer   General Partner

PERSONAL GUARANTEE

In return for the extension of credit the undersigned hereby jointly, severally, and personally guarantee to pay and be responsible for payment of all amounts due Seller by Applicant, including collection charges and/or attorney's fees. This shall be an open and continuing guarantee, notwithstanding any charges, removals, extensions or the like granted by Seller. The undersigned hereby waives notice of default or non-payment. Seller shall be entitled to look to the undersigned for full payment without prior demand, notice of seeking recourse against any other party.

PRINT NAME _____ SIGNATURE _____ DATE _____

PRINT NAME _____ SIGNATURE _____ DATE _____