



AMERICAN WIRE GROUP, INC.
COMMERCIAL CREDIT APPLICATION AND AGREEMENT
CREDIT TERMS AND POLICY

The undersigned ("the Customer") may desire to purchase goods and services from American Wire Group Corporation ("the Company") on account and agrees in consideration of the account to be bound by the following terms and conditions.

The Customer, in consideration of such extension of credit, shall pay the Company the total due on the Company's invoice upon receipt or by the due date as stated on the invoice. Failure to comply with these terms may result in placing the Customer's account on credit hold until the entire balance is paid in full and the assessment of a late charge or interest fee, which shall be computed by applying a periodic rate of 1.5% per month to the delinquent portion of the Customer's account (excluding accrued delinquent charges).

In the event of default, the Customer agrees to pay all costs of collections, including all reasonable attorney fees, court costs, repossession fee, and/or collection agency fees, together with interest thereon at the maximum rate allowed by law. The laws of the state of Florida will govern the enforcement and interpretation of this agreement. Customer agrees that, at Company's election, all actions and proceedings arising from or related to this Agreement will be litigated in the courts having situs within the state of Florida.

COMPANY INFORMATION

COMPANY NAME:
BUSINESS STARTED:

BILLING ADDRESS:
Street Address City State Zip

SHIPPING ADDRESS:
Street Address City State Zip

PHONE NUMBER: FAX NUMBER:

TYPE OF BUSINESS: INDIVIDUAL PARTNERSHIP CORPORATION

D&B #: P.O. REQUIRED?: YES NO

AMOUNT OF CREDIT REQUESTED: \$
(Financial Statements Required For Requests > \$100K)

CONTACT INFORMATION

ACCOUNTS PAYABLE:
Name Phone Number

PURCHASING:
Name Phone Number



BANK REFERENCE

BANK NAME & LOCATION: _____

ACCOUNT NUMBER: _____ CONTACT PERSON: _____

PHONE NUMBER: _____ FAX NUMBER: _____

TRADE REFERENCES

COMPANY NAME: _____ ACCOUNT #: _____

ADDRESS: _____
Street Address City State Zip

PHONE NUMBER: _____ FAX NUMBER: _____

COMPANY NAME: _____ ACCOUNT #: _____

ADDRESS: _____
Street Address City State Zip

PHONE NUMBER: _____ FAX NUMBER: _____

COMPANY NAME: _____ ACCOUNT #: _____

ADDRESS: _____
Street Address City State Zip

PHONE NUMBER: _____ FAX NUMBER: _____

The undersigned hereby states that the information provided in this application is true and correct to the best of his/her knowledge, and agrees to the terms and conditions of this agreement. The undersigned also authorizes the Company to check credit as necessary through the provided trade references, bank references, credit-reporting agencies, and all other legally acceptable means. It is also understood that extending, increasing, decreasing, and denying credit is at the sole discretion of the creditor and that the Company will retain this application whether or not credit is extended.

The undersigned further declares to American Wire Group, Inc. that he/she is duly authorized to sign this credit application form on behalf of the company herein represented.

Authorized Signature

Date

Title

**PLEASE FAX THIS COMPLETED
FORM, FINANCIAL STATEMENTS,
AND TAX INFORMATION TO
AMERICAN WIRE GROUP CREDIT
DEPT. AT FAX NUMBER 954-455-9886**