

## Hellmann Credit Application

### Basic Company Information

<input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP			For Hellmann Use Only		
Company Name ("Applicant") <i>GAS ENGINEERING</i> <i>ECOTURF MIDWEST</i>			Account#:  		
Street Address <i>789 GOLF LN</i>			Billing Address (If Different)  		
City	State	Zip Code	City	State	Zip Code
<i>Bensenville</i>	<i>IL</i>	<i>60106</i>			
State of Incorporation	Year	EIN#	Phone	Fax	Sales Rep:
<i>IL</i>	<i>11/1989</i>	<i>36-3274751</i>	<i>6303509500</i>	<i>-9555</i>	<i>Tom Miller</i>
Requested Credit Line*	D&B #	Nature of Business		Number of Shipments	
<i>\$5,000.-</i>		<i>molding plastic</i>		Imports	Exports      Domestic

\*Credit Limit over \$10,000.00 requires submission of Financial Statements

### Name of Officers, Partners or Owners      Resources/Contact Information

Name/Title	Accounts Payable
<i>SKIP GLATT - PRESIDENT</i>	<i>SAME</i>
Name/Title	Name      Phone
	<i>TERRY PAWULA      630-350-9500</i>
Name/Title	Operations Contact
	Name      Phone
	Contact Person for Collections
	Name      Phone

### Bank References (1)      Bank References (2)

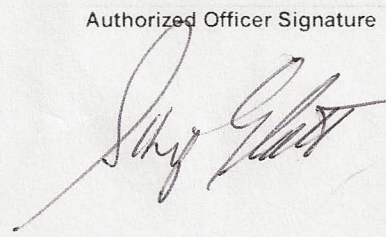
Name of Bank	Account Number	Name of Bank	Account Number
<i>ITASCA BANK</i>	<i>100276101</i>		
Address		Address	
<i>308 W. IRVING PK</i>	<i>ITASCA, IL</i>		
Phone		Phone	
<i>630-773-0350</i>	<i>60143</i>		
Contact		Contact	
<i>TIM HAMILANO</i>			

### Trade References (Please include at least one transportation trade reference)

(1) Name	(2) Name	(3) Name
<i>ECHO CL</i>	<i>NOVAK</i>	<i>MEJA</i>
Type of Business	Type of Business	Type of Business
<i>LOGISTICS</i>	<i>PACKAGING</i>	<i>MAT. PLASTIC</i>
Address	Address	Address
<i>CHI, IL</i>	<i>MADINA, IL</i>	<i>ROMEOVILLE, IL</i>
Phone	Phone	Phone
<i>312-274-3286</i>	<i>630-307-8064</i>	<i>815-230-0092</i>
Contact	Contact	Contact
<i>CY</i>		

Terms: Payment due within 30 days from date of invoice  
 Past due accounts are subject to a monthly late charge up to 1.5% of the overdue balance

The undersigned is authorized to sign on behalf of the Applicant and agrees to the Terms and Conditions of Service on the reverse of this Agreement. If this agreement is received via facsimile, the undersigned acknowledges receipt of and agreement to said terms and conditions of service as indicated on the reverse side.

Authorized Officer Signature	Name/Title	Date
	<i>SKIP GLATT - PRES.</i>	<i>3/20/14</i>