



Dear Customer,

Just a quick note to say how excited we are to have you as our new client.

We understand how many other companies are out there, so we offer our sincere thanks for choosing Biosynthetic as your alternate sustainable base oil and estolide provider.

Our company has over 10 years of proven experience earning us the solid reputation we hold. We are confident that you'll be pleased with your decision, and of course, we're always happy to assist you with all your questions and concerns you may have.

To make sure you have the right contact information on file, please find your key contact listed below:

- |                      |                   |  |
|----------------------|-------------------|--|
| • Credit             | Ashley Willoughby | <a href="mailto:awilloughby@biosynthetic.com">awilloughby@biosynthetic.com</a> |
| • Logistics          | Travis Thompson   | <a href="mailto:tthompson@biosynthetic.com">tthompson@biosynthetic.com</a>     |
| • Marketing          | Debby Neubauer    | <a href="mailto:dneubauer@biosynthetic.com">dneubauer@biosynthetic.com</a>     |
| • Sales              | Mike Woodfall     | <a href="mailto:mwoodfall@biosynthetic.com">mwoodfall@biosynthetic.com</a>     |
| • Technical Services | Marlon Lutz       | <a href="mailto:mlutz@biosynthetic.com">mlutz@biosynthetic.com</a>             |
|                      | Julie Holland     | <a href="mailto:jholland@biosynthetic.com">jholland@biosynthetic.com</a>       |

We look forward to working for you and providing you with efficient and effective customer service. Thanks again for choosing Biosynthetic Technologies.

Kind regards,

Mark Miller, CEO  
memiller@biosynthetic.com



**CUSTOMER SET-UP FORM**  
**BUSINESS CONTACT INFORMATION**

Company Name:  
Company Address:  
City: State: Postal Code:  
Phone: Fax:  
Federal Tax ID Number: Dunn & Bradstreet Number:  
Tax Exempt: :Yes :No If Yes, Please Attach Tax-Exemption Certificate  
Nature of Business:

Main Contact Name:  
Address:  
City: State: Postal Code:  
Phone: Fax:  
Email:  
Accounts Payable Contact Name:  
Address:  
City: State: Postal Code:  
Phone: Fax:  
Email:  
Invoices: Mailed or Emailed

**OPERATIONS INFORMATION**  
Please provide the addresses of delivery (Ship-to) locations

Address:  
City: State: Postal Code:  
Phone: Fax:  
Contact Name(s):  
Address:  
City: State: Postal Code:  
Phone: Fax:  
Contact Name(s):  
Email:

**ADDITIONAL INFORMATION**  
Please include any other necessary information (ie. Freight forwarder information, designated carrier information, etc)

Authorized Representative Date:  
Signature  
Title

Please Submit Completed Form to:  
**Mike Woodfall**  
**Phone:** 317-556-1050  
**Email:** mwoodfall@biosynthetic.com  
[www.Biosynthetic.com](http://www.Biosynthetic.com)



# BIOSYNTHETIC<sup>®</sup> TECHNOLOGIES

## BUYER'S CREDIT APPLICATION & OPEN ACCOUNT AGREEMENT

For the purposes of establishing open account privileges with Biosynthetic Technologies, LLC and affiliated companies, the undersigned furnishes the following information.

Company Name: \_\_\_\_\_ Date Business Established: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Business Type:  
 Sole Proprietor     Ltd. Partnership     LLC  
 Proprietorship     Corporation

City, State and Zip: \_\_\_\_\_ If incorporated, which State? \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Tax Exempt:     Yes     No

Invoices:     Email     Mailed    If yes, please attach tax-exemption certificate.

Email Address: \_\_\_\_\_ Federal ID#: \_\_\_\_\_

Website: \_\_\_\_\_ D&B #: \_\_\_\_\_

Has bankruptcy ever been filed?     Yes     No    Credit Need:    \$ \_\_\_\_\_

If yes, please give details: \_\_\_\_\_

### NAMES OF OWNERS, PARTNERS OR OFFICERS

| NAME | TITLE |
|------|-------|
|      |       |
|      |       |
|      |       |
|      |       |

### PARENT COMPANY OR SUBSIDIARY LOCATIONS

| COMPANY NAME | ADDRESS |
|--------------|---------|
|              |         |
|              |         |
|              |         |
|              |         |

### BANKING INFORMATION

Bank Name: \_\_\_\_\_ Address: \_\_\_\_\_

Checking Account # \_\_\_\_\_ Bank Representative: \_\_\_\_\_

Savings Account # \_\_\_\_\_ Telephone: \_\_\_\_\_

Loan Account # \_\_\_\_\_ Fax: \_\_\_\_\_

### CREDIT REFERENCE

| COMPANY NAME & CONTACT | EMAIL | FAX | TELEPHONE |
|------------------------|-------|-----|-----------|
| <u>1)</u>              |       |     |           |
|                        |       |     |           |
| <u>2)</u>              |       |     |           |
|                        |       |     |           |
| <u>3)</u>              |       |     |           |
|                        |       |     |           |
| <u>4)</u>              |       |     |           |
|                        |       |     |           |



**BUYER'S CREDIT APPLICATION & OPEN ACCOUNT AGREEMENT**

**Terms and Conditions**

It is agreed the buyer will pay all invoices within the stated terms and agrees to all terms contained in invoices supplied by seller as may be amended from time to time. In the event payment is not timely made, the buyer also agrees to pay a time-price difference charge (service charge) of the lesser of 1 ½ % per month (18 % per annum) or the maximum lawful rate on all overdue amounts, and to pay all collection costs incurred by seller in enforcement of the terms and conditions of this agreement, including court costs, actual reasonable attorney's fees and collection agency fees, within the standards of the industry, but not less than 25 % of the unpaid amount of principal and accumulated service charge, all without relief from valuation and appraisal laws.

Buyer further agrees that any line of credit desired or approved is not a limitation of liability, and the undersigned expressly agrees that it will be responsible for valid charges in excess of a line of credit either desired or approved.

Having obtained all necessary authority, the undersigned authorizes Biosynthetic Technologies, LLC and its agents, attorneys and employees to investigate the credit standing, financial circumstances and responsibility of buyer and authorizes and instructs all persons having information concerning buyer's credit standing, financial circumstances and responsibility to release such information to Biosynthetic Technologies, LLC, its agents, attorneys or employees.

The buyer further grants to seller a security interest in buyer's equipment, contract rights, inventories, receivables and proceeds of sales as collateral to secure the buyer's performance of all obligations. The buyer hereby appoints any employee, agent, or attorney of seller as buyer's attorney in fact to endorse and file on behalf of buyer any UCC 1 form to perfect or record the security interest.

All the information supplied by buyer is correct to the best of the knowledge of the undersigned, and the buyer understands that all goods or services purchased from seller are subject to all terms and conditions contained in this credit application and agreement and all other terms and conditions contained on any of the seller's invoices.

Biosynthetic Technologies, LLC is only willing to sell its products pursuant to its standard terms and conditions, which are hereby incorporated by reference into this document. Buyer agrees that all of its purchases of product from Biosynthetic Technologies, LLC shall be governed such terms and conditions. Accordingly, buyer agrees that any terms either proposed by buyer and/or contained within a document supplied by buyer that are in addition to and/or different from Biosynthetic Technologies, LLC's terms and conditions, shall not apply to the purchase of products from Biosynthetic Technologies, LLC.

**By signing below, I/we hereby authorize Biosynthetic Technologies, LLC to obtain a consumer credit report through a reporting company chosen by Biosynthetic Technologies, LLC. I/We understand and agree that Biosynthetic consumer credit report for purposes of evaluating financial readiness to obtain a line of credit with Biosynthetic Technologies, LLC.**

|                   |               |
|-------------------|---------------|
| <b>By:</b>        | <b>Title:</b> |
| _____             | _____         |
| <b>Signature:</b> | <b>Date:</b>  |
| _____             | _____         |

**Please submit completed application to:**

**Mike Woodfall**  
**Phone:** 317.556-1050  
**Email:** mwoodfall@biosynthetic.com  
info@biosynthetic.com

[www.Biosynthetic.com](http://www.Biosynthetic.com)