



To: New Voyager Industries, Inc. Customers

From: Voyager Industries, Inc. Accounting Department

Please complete the following 3 page Credit Application for Voyager Industries, Inc. Follow the instructions below for returning the completed application.

**\*\* TERMS ARE SUBJECT TO CREDIT APPROVAL \*\***

Voyager Industries, Inc. must have a signed and completed credit application on file. Credit applications may be e-mailed, faxed, or mailed. For fastest processing of your credit application, please send completed form via e-mail to the e-mail address listed below. Please include the words "Credit application" in the subject line. **A signed copy, mailed or faxed, must follow all e-mailed applications.**

Mailing Address: Voyager Industries, Inc.  
Attn: Credit Department  
PO Box 566  
Brandon, MN 56315-0566

Fax Number: (320) 834-4745

E-mail: [accounting@voyager-industries.com](mailto:accounting@voyager-industries.com)

If you have questions, please contact:

Jon Boutain, CFO  
Voyager Industries, Inc.  
320-524-2386  
[jonb@voyager-industries.com](mailto:jonb@voyager-industries.com)

**New Account Information**  
**Confidential Credit Information**

(Please complete fully)

Voyager Industries, Inc.  
PO Box 566  
Brandon, MN 56315-0566  
Phone: (320) 834-4940  
Fax: (320) 834-4439

Salesperson: \_\_\_\_\_

Business Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

*Street Address*

*City*

*State*

*Zip Code*

Ship to Address: \_\_\_\_\_

*Street Address*

*City*

*State*

*Zip Code*

Description of Business: \_\_\_\_\_

Business Type:  Corporation  Partnership  Sole Proprietor      Number of Years in Business: \_\_\_\_\_

**ACCOUNTS PAYABLE**

Contact Person: \_\_\_\_\_

*Name*

*Phone Number*

*Ext*

*Fax Number*

\_\_\_\_\_  
*Email Address*

**PURCHASING**

Contact Person: \_\_\_\_\_

*Name*

*Phone Number*

*Ext*

*Fax Number*

\_\_\_\_\_  
*Email Address*

**ALL OWNERS AND/OR COMPANY OFFICERS\***

1. \_\_\_\_\_  
*Name* *Title* *SSN*

\_\_\_\_\_  
*Home Street Address* *City* *State* *Zip Code*

2. \_\_\_\_\_  
*Name* *Title* *SSN*

\_\_\_\_\_  
*Home Street Address* *City* *State* *Zip Code*

3. \_\_\_\_\_  
*Name* *Title* *SSN*

\_\_\_\_\_  
*Home Street Address* *City* *State* *Zip Code*

\* Please attach a separate sheet for any additional owners.

**Voyager Industries, Inc.**  
**Credit Application (Page 2 of 3)**

**SUPPLIER REFERENCES**

1. \_\_\_\_\_  
*Name* *Phone Number* *Fax Number*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

2. \_\_\_\_\_  
*Name* *Phone Number* *Fax Number*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

3. \_\_\_\_\_  
*Name* *Phone Number* *Fax Number*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

4. \_\_\_\_\_  
*Name* *Phone Number* *Fax Number*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

5. Mortgage holder/Landlord \_\_\_\_\_  
*Phone Number*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

**BANK REFERENCES**

1. \_\_\_\_\_  
*Financial Institution Name*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

\_\_\_\_\_ *Loan Officer's Name* *Phone Number* *Ext* *Fax Number*

2. \_\_\_\_\_  
*Financial Institution Name*

\_\_\_\_\_ *Street Address* *City* *State* *Zip Code*

\_\_\_\_\_ *Loan Officer's Name* *Phone Number* *Ext* *Fax Number*

DUNS Number: \_\_\_\_\_

Expected monthly purchases: \$ \_\_\_\_\_ Line of Credit Requested: \$ \_\_\_\_\_

State Tax Exemption Number: \_\_\_\_\_ (please enclose copy of form)

Are financial statements available for review? Yes No

Has the firm or any of it's principals ever been Bankrupt? Yes No

If Yes, explain \_\_\_\_\_

**Standard Credit Terms for Voyager Industries, Inc.**

1. Standard terms are payment upon delivery of product. In some cases credit may be established.
2. If credit is established. Payment is expected within terms.
3. Further orders will not be accepted and shipments will not be made in the event account is past due.

**Voyager Industries, Inc.**  
**Credit Application (Page 3 of 3)**

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. I/we further agree that Voyager Industries, Inc. may contact our banks, vendors, or principals to determine our credit and financial responsibility, now or at any time in the future as is necessary.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

---

*Name of Business*

---

<i>Print Name</i>	<i>Title</i>	<i>Signature</i>
<i>Print Name</i>	<i>Title</i>	<i>Signature</i>

---

---

**Personal Guarantee**

In consideration for Voyager Industries, Inc. extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to Voyager Industries, Inc. by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between Voyager Industries, Inc. and the business. Voyager Industries, Inc. shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by Voyager Industries, Inc.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by Voyager Industries, Inc. Said notice shall specify the date on which this guaranty is to be terminated, said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date: \_\_\_\_\_ Name: \_\_\_\_\_  
*(Name of person guaranteeing payment, NO TITLE)*

Home address \_\_\_\_\_

Home Phone # \_\_\_\_\_ SS# \_\_\_\_\_

Signature of person guaranteeing payment \_\_\_\_\_

Name of Business whose account is guaranteed \_\_\_\_\_

---

---

**CREDIT DEPARTMENT USE ONLY**

Date: \_\_\_\_\_  
Line of Credit Approved / Denied Amount \$ \_\_\_\_\_  
Comments: