Bodypoint, Inc. Confidential Application

NOTE: A COPY OF YOUR VALID RESALE CERTIFICATE IS REQUIRED TO OPEN AN ACCOUNT To ensure your account is setup correctly, please type or print all required fields in the form below.

	LEGAL NAME OF BUSINESS			TRADE NAME (S) OR DBA			
~	FEDERAL TAX ID NO.			DATE BUSINESS WAS ESTABLISHED			
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CHECK YOUR PERFERED PAYMENT TYPE: Pre Pay W/ Credit Card Credit Terms (See Page 2) HAS YOUR COMPANY FILED BRANKRUPTCY IN THE LAST 7 YEARS? LEGAL FORM OF BUSINESS: (check one)							
×	HAS YOUR COMPANY FILED BRANKRUPTCY IN THE LAST 7 YEARS?						
ac	LEGAL FORM OF BUSINESS: (check one)						
ä							
	Corporation	Sole Proprietorship	General Partners	ship Individua	al LLC	Other:	
	TYPE OF BUSIN	ESS: (check one) Wholesa	ler Reta	ailer Manu	Ifacturer	Other (specify)	

	Shipping Address		Billing Address (if same, please indicate)
	Street		Street
SS			
ddress	City State	e Zip	City State Zip
Ă			Contact Name
	Main Phone Number		Main Phone Number

	Please provide the following information.						
	Title	Full Name	Email address	Direct Phone			
Contacts	General / Main	N/A N/A N/A					
	Principal						
	ATP/ RTS						
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	Accounts Payable						
	Buyer/Purchasing Dep.		Fax:				

odypoint rep.	Brochure	Internet	Trade Show	Industry Professional	Other	
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What brand of wheelchair(s) do you sell?						
mat brand of whot	Jonan (3) do you 3	011.				

NOTE: THIS PAGE IS TO BE FILLED OUT ONLY IF YOU ARE APPLYING FOR CREDIT TERMS

APPLICANT'S NAME

References

Trade References:

To the greatest extent possible, please include suppliers in the medical industry

irer	Supplier Name	Account No.	Telephone No.	Recent High Credit
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Account Agreement

- The person or business signing below ("Applicant") hereby makes this application for credit to Bodypoint, Inc. and or any of its subsidiaries or affiliates now owned or hereafter acquired ("Creditor").
- In making this application, Applicant agrees that all amounts payable on or before the due date as shown on each invoice will be paid, and if not paid on or before said date, are then in default.
- Should credit availability be granted by Creditor, all decisions with respect to the extension or continuation of credit shall be at the sole discretion of Creditor. Creditor may terminate any credit availability within its sole discretion.
- Applicant understands that Creditor is relying on the truth and accuracy of the information provided in this application for credit as well as any other information provided to Creditor including financial statements (in aggregate, the "Credit Application"). Creditor would not extend credit to Applicant without full and accurate information provided for in the Credit Application.
- Applicant will provide any other information from time to time upon request of Creditor including an updated Application, financial statements, and information regarding secured financing.
- Applicant authorizes Creditor to conduct any credit investigation deemed necessary of Applicant, including, but not limited to personal credit information about Guarantors, General Partners, Proprietors, and Individual Applicants.
- Applicant hereby explicitly authorizes Trade References cited above to release credit information.
- The undersigned further declares that he/she is duly authorized to sign the Credit Application on behalf of Applicant.
- In any event, Creditor reserves a security interest in all goods sold to applicant until amounts owing are paid in full. Any invoice not paid by its due date is subject to an interest charge of 1.5% per month (18% per annum), finance charge, and will be applied to any unpaid or outstanding balance. This interest charge is cumulative for any month(s) and/or portion thereof where there remains an outstanding balance.
- Should litigation or collection action be necessary or result due to default of payment of the above balance (plus any interest due), all legal fees, court expenses, and any and all other reasonable expenses incurred by Bodypoint, Inc. or their authorized agent to enforce payment of the balance due on this account, will be paid by the party whose signature appears hereon.
- Applicant agrees to pay a \$50.00 service charge on any returned check.
- In the event of default, Applicant further agrees to pay all costs of collection, including all reasonable attorneys' fees, plus court costs and/or collection agency fees together with interest thereon at the maximum amount allowed by law to Creditor or its assignee.
- Applicant agrees that Creditor may rely on facsimile copies of this Credit Application as equally binding as if executed in original. By executing the Credit Application below, Applicant acknowledges and agrees with the terms and conditions stated above.

SIGNATURE	TITLE
PRINT NAME	DATE