

CREDIT APPLICATION

Company Information

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|--|-------------------|
| Company Name: | |
| Address (Street Name and Number) | City |
| State/Province | Country/Post Code |
| Phone: | Fax: |
| CEO/Controller | |
| Phone: | Fax: |
| Account Payable | |
| Phone: | Fax: |
| Business Nature: <input type="checkbox"/> Manufacturing <input type="checkbox"/> Trading <input type="checkbox"/> Others | |
| Year Established: | |

Banking Information

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|----------------------------------|-------------------|
| Name of Bank | |
| Address (Street Name and Number) | City |
| State/Province | Country/Post Code |
| Contact Person | Account Number |
| Telephone | Fax |

Trade References

| | |
|----------------------------------|-------------------|
| Company Name (1) | |
| Address (Street Name and Number) | City |
| State/Province | Country/Post Code |
| Phone: | Fax: |
| Contact | Title/Position |
| Company Name (2) | |
| Address (Street Name and Number) | City |
| State/Province | Country/Post Code |
| Phone: | Fax: |
| Contact | Title/Position |
| Company Name (3) | |
| Address (Street Name and Number) | City |
| State/Province | Country/Post Code |
| Phone: | Fax: |
| Contact | Title/Position |

We hereby solicit the opening of an account with ORITE Ingredient Ltd. And certify that all of the information provided on this form are true and correct. We hereby accept and agree to abide by the terms and conditions of doing business with ORITE. We agree to pay all ORITE's invoices upon receipt or request. We hereby agree to pay upon request to ORITE an additional charge of 18% per annum, calculated on a rate of 1.5% per month on any and all unpaid ORITE's invoices.

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|-------------|--------|
| Print Name: | Title: |
| Signature: | Date: |