

AGREEMENT OF TERMS AND AUTHORIZATION TO RELEASE INFORMATION

All payments are due within 30 days from date of invoice. "NOTICE TO BUYER: DO NOT SIGN THIS AGREEMENT BEFORE YOU READ IT OR IF IT CONTAINS ANY BLANK SPACES. YOU ARE ENTITLED TO A COPY OF THE AGREEMENT YOU SIGNED. YOU WILL RECEIVE A COPY OF THIS AGREEMENT UPON VERTICAL WATER SOLUTIONS, LLC ACCEPTANCE. KEEP THIS AGREEMENT TO PROTECT YOUR LEGAL RIGHTS." I hereby authorize our bank(s) to release any information necessary to assist in establishing a line of credit.

Customer will be liable for reasonable collection costs and legal fees in case of default. Customer agrees to pay a finance charge of 18% per annum on balances no paid within 30 days. Customer authorizes their financial institution to release credit information to Metro Equipment & Rental Co. Inc.

Date _____ Signed by _____ Title _____

INDIVIDUAL GUARANTEE AGREEMENT

The undersigned here by guarantees full payment for services and/or merchandise purchased from VERTICAL WATER SOLUTIONS, LLC by the applicant hereinafter referred to as "debtor", at the office of VERTICAL WATER SOLUTIONS, LLC in Midland, Midland County, Texas.

This Guaranty is a continuing guaranty and shall cover all future indebtedness of Debtor as contemplated hereunder, including indebtedness arising under successive transactions that shall either continue the indebtedness or from time to time renew it after it has been satisfied. Said Guaranty shall continue and remain in full force and effect until written notice of revocation has been received by VERTICAL WATER SOLUTIONS, LLC. Such revocation shall not affect the Guaranty as to merchandise and/or services purchased by Debtor prior to receipt of the notice of revocation by VERTICAL WATER SOLUTIONS, LLC, but shall be effective as to all services and/or merchandise purchased by Debtor from and after receipt of the notice of revocation.

Date __ Individual Guarantor: President, or Partner __

Business Credit Application

Name/Address

Last:	First:	Middle Initial:	Title
Name of Business:			Tax I.D. Number
Address:			
City:	State:	ZIP:	Phone:

Company Information

Type of Business:	In Business Since:
Legal Form Under Which Business Operates:	
Corporation <input type="checkbox"/>	Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>
If Division/Subsidiary, Name of Parent Company:	In Business Since:
Name of Company Principal Responsible for Business Transactions:	Title:
Address:	City: State: ZIP: Phone:
Name of Company Principal Responsible for Business Transactions:	Title:
Address:	City: State: ZIP: Phone:

Bank References

Institution Name:	Institution Name:	Institution Name:
Checking Account #:	Savings Account #:	Home Equity Loan: Loan Balance:
Address:	Address:	Address:
Phone:	Phone:	Phone:

Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Signature

Date