BORDER BROKERAGE, INC.
NEW CUSTOMER APPLICATION FORM
Tel. 956) 722-0790
Return by E-Mail: claudiag@borderb.com

I, LEGAL BUSINESS NAME: ____Air Trends International _____

PHYSICAL ADDRESS: 1 Gemini Industrial Dr, Roxana, IL 62084

BILLING ADDRESS (IF DIFFERENT): 9909 Manchester Rd #320, St. Louis, MO 63122

TEL NO : +1 305-650-9100_____ EMAIL: shannon@airtrendsinternational.com_____

IRS /EIN#/SS# 81-3846363_____ YEARS IN BUSINESS_____20+_____

DUNS# _____

BUSINESS TYPE (CORP / LLC / PARTNERSHIP / OTHER): _____LLC_____

ACCT PAYABLES MANAGER: _____ TEL NO: _____

II, BANK INFORMATION:

BANK NAME: _____ Parkside Financial Bank & Trust_____

ROUTING /ABA:_____ 081019405_____ACCT. NO: _____ 8122194_____

III, BUSINESS / TRADE REFERENCES:

1) **NAME OF COMPANY:_____ Parkside Financial Bank & Trust_____**

   TEL.NO. / CONTACT: Mary-Cait Cox, (314) 290-8614

2) **NAME OF COMPANY: _____Continuserve_____**

   TEL. NO / CONTACT: John Webster, (770) 841-7154

IV, TERMS / CONDITIONS / SIGNATURE: WE WARRANT THE INFORMATION PROVIDED ABOVE TO BE TRUE AND CORRECT. I, OWNER, OFFICER OR AUTHORIZED EMPLOYEE OF COMPANY NAMED ABOVE, GRANT PERMISSION TO INVESTIGATE THE REFERENCES INCLUDED IN THE APPLICATION INCLUDING COMMERCIAL AND CONSUMER CREDIT CHECKS. I AGREE TO BORDER BROKERAGE, INC.'S CREDIT TERMS OF PAYMENT ON RECEIPT, BUT NO LONGER THAN 30 DAYS.

	COO	Jason T. Saghir	4/5/2021
SIGNATURE)	**(TITLE)**	**(PRINTED NAME)**	**(DATE)**