



Application for Credit

Please print or type. All addresses should be complete with zip codes. All phone and fax numbers should be complete with area codes.

Company Information

Name of Company _____ DUNS # _____

Shipping Address _____

City/State/Zip/Country _____ Phone _____

Mailing Address _____

City/State/Zip/Country _____ Phone _____

Fax _____ E-Mail Address _____

Years in Business _____ Company is () Corporation () Partnership () Individual

Type of Industry _____ Credit Line Sought \$ _____

TRADE REFERENCES

Vendor 1 _____ Contact _____

Payment Address _____ City/State/Zip/Country _____

Phone: _____ Fax _____ Account # _____

Vendor 2 _____ Contact _____

Payment Address _____ City/State/Zip/Country _____

Phone: _____ Fax _____ Account # _____

Vendor 3 _____ Contact _____

Payment Address _____ City/State/Zip/Country _____

Phone: _____ Fax _____ Account # _____

BANK

Bank Name _____

Address _____

Bank Officer or Department _____

Phone _____ Fax _____

CONDITIONS & TERMS

TERMS OF SALE, INCLUDING TERMS OF PAYMENT AND CHARGES, FOR EACH PURCHASE ARE AGREED TO BE THOSE SPECIFIED ON THE FACE OF EACH INVOICE. THE CUSTOMER HEREBY AGREES TO PAY ALL COSTS OF COLLECTION OR LEGAL FEES SHOULD SUCH ACTION BE NECESSARY DUE TO NON-PAYMENT. THE ABOVE INFORMATION IS WILLINGLY SUPPLIED AND THE CREDITOR IS AUTHORIZED TO CONTACT THE ABOVE BANK AND TRADE REFERENCES IN ORDER TO ESTABLISH THE CREDIT WORTHINESS OF THE ABOVE NAMED COMPANY. IF THE APPLICANT IS NOT A CORPORATION, THE CREDITOR IS AUTHORIZED TO OBTAIN CREDIT REPORTS ON THE PROPRIETORS, PARTNERS OR PRINCIPALS. SHOULD CREDIT AVAILABILITY BE GRANTED BY THE CREDITOR, ALL DECISIONS WITH RESPECT TO THE EXTENSION OR CONTINUATION SHALL BE IN THE SOLE DISCRETION OF THE CREDITOR. THE CREDITOR MAY TERMINATE ANY CREDIT AVAILABILITY WITHIN ITS SOLE DISCRETION.

DISPUTES: ANY DISPUTE OR CONTROVERSY ARISING FROM THIS AGREEMENT WILL BE RESOLVED BY ARBITRATION BY THE AMERICAN ARBITRATION ASSOCIATION AT ORANGE COUNTY, CALIFORNIA. THE LANGUAGE OF THE ARBITRATION SHALL BE ENGLISH. THE NUMBER OF ARBITRATORS SHALL BE ONE. THE PARTIES AGREE THE AMERICAN ARBITRATION ASSOCIATION'S EXPEDITED RULES SHALL APPLY AND THEY WAIVE ALL RIGHT TO ANY HEARING REQUIRING WITNESS PRODUCTION. THE ARBITRATOR SHALL ISSUE AN AWARD BASED UPON THE WRITTEN DOCUMENTARY EVIDENCE SUPPLIED BY THE PARTIES. THE ARBITRATOR'S AWARD SHALL BE BINDING AND FINAL. THE LOSING PARTY SHALL PAY ALL ARBITRATION EXPENSES, INCLUDING ALL ATTORNEY'S FEES.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM:

APPLICANTS NAME _____ TITLE _____

DATE _____ APPLICANT'S SIGNATURE _____