

CREDIT APPLICATION

HOW APPLIED: Phone Mail/ Fax Taken By: _____
Interviewer's Name

Business Name _____ Phone _____

Address _____ For Past _____ Years
(Street) (City) (State) (Zip)

Mailing Address _____
(Street) (City) (State) (Zip)

D/B/A _____ Federal Tax I.D. # _____

Former Business Address (If Applicable) _____

Type of Business _____ Date Established _____ How Long in Business? _____

Does State, County or City require a License? Yes No
If yes, license # _____

OWNERSHIP: SOLE OWNER PARTNERSHIP CORPORATION

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

PRINCIPAL: _____
(Name) (Title) (SS#) (Home Address)

TRADE REFERENCES: (Name suppliers of major products and services)
Name: _____ Address/ Phone: _____

BANK REFERENCE: Checking Loan Savings

(Name) (Address) (Tel. #) (Acct.#)

(Name) (Address) (Tel. #) (Acct.#)

(Name) (Address) (Tel. #) (Acct.#)

Est. Annual Sales _____

Has the firm or any of its Principals ever been bankrupt? Yes No
If yes, please explain: _____

OTHER BUSINESS DEBTS:

Name	Address	Balance Due
_____	_____	_____

Person to contact about Account: _____ Title: _____

Terms and conditions:

Information provided will be kept in strict confidence and used only for the purposes of credit evaluation and for collection of funds that are past due.

1. Applicant has the authority to enter into this agreement.
2. It is understood that all invoices will be paid in full within 30 days of the date of invoice, unless other terms are stated. No cash discounts are allowed. Other terms: DUE UPON RECEIPT
3. Non sufficient fund (NSF) checks will be subject to a \$20.00 charge
4. If this account is placed in the hands of a licensed collector or an attorney for enforcement, then the undersigned agree/agrees to pay all costs of collection including the attorney s fees, court costs and agency fees.
5. Failure to comply with these Terms and Conditions may result in immediate cancellation of credit privileges without notice.

The undersigned will/will not submit a financial statement. Any misrepresentation in this application will be considered evidence of a fraud, since this information is the basis for the granting of credit.

As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed.

_____	_____	_____	_____
(Name)	(Title)	(Name)	(Title)
_____	_____	_____	_____
(Name)	(Title)	(Name)	(Title)

PERSONAL GUARENTEE

In consideration of credit being extended by Riverside Media Sales to the above named applicant for the merchandise to be purchased whether applicant be an individual or individuals, a proprietorship, a partnership, a corporation, or other entity, the undersigned guarantor or guarantors each hereby contract and guarantee to Riverside Media Sales the faithful payment, when due, of all accounts of said applicant for the purchases made within five years next after the date of this application. The undersigned guarantor or guarantors each hereby expressly waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment, and demand for payment of applicant, protest and notice to undersigned guarantor or guarantors of dishonor or default by applicant, acceptance of partial payment or partial compromise, all other notices to which the undersigned guarantor or guarantors might otherwise be entitled and demand for payment under this guarantee. Absent written permission by creditor, this personal guarantee may not be revoked.

_____	_____
(Name)	(Name)
_____	_____
(Name)	(Name)

PLEASE FAX COMPLETED APPLICATION TO OUR CREDIT DEPARTMENT AT FAX: (518) 523-4708

CREDIT DEPARTMENT ONLY

Date Line of Credit Approved _____ Date Line of Credit Denied _____

COMMENTS: _____