



**CREDIT APPLICATION**  
(PLEASE PRINT. MUST BE COMPLETED IN FULL.)

APPLICANT (BUSINESS OR CORPORATE NAME)					APPLICATION DATE	
BUSINESS STREET ADDRESS				BILLING ADDRESS (IF DIFFERENT)		
CITY	STATE	ZIP CODE		CITY	STATE	ZIP CODE
BUSINES PHONE NO.		BUSINES FAX NO.		YEAR ESTABLISHED		RESALE PERMIT OR SALES TAX NO.
E-MAIL		TYPE OF BUSINESS		SALES CONTACT		SS# OR FED EIN #
OWNERS (IF APPLICANT IS A SOLE PROPRIETORSHIP OR PARTNERSHIP) OR OFFICERS (IF A CORPORATION)						
NAME		TITLE SS#		HOME ADDRESS		HOME PHONE NO.
NAME		TITLE SS#		HOME ADDRESS		HOME PHONE NO.
PURCHASING CONTACT						
NAME		TITLE		PHONE #		EMAIL ADDRESS
BANK OR SAVINGS AND LOAN ASSOCIATION						
NAME		BRANCH ADDRESS			ACCT NO.	TYPE OF ACCT
NAME		BRANCH ADDRESS			ACCT NO.	TYPE OF ACCT
APPLICANT'S PRINCIPAL SUPPLIERS (LIST AT LEAST THREE)						
NAME		ADDRESS			PHONE #	FAX #
NAME		ADDRESS			PHONE #	FAX #
NAME		ADDRESS			PHONE #	FAX #
NAME		ADDRESS			PHONE #	FAX #
HAS APPLICANT OR ANY OF ITS PRINCIPALS EVER FILED A VOLUNTARY PETITION IN BANKRUPTCY? IF YES, EXPLAIN ON A SEPERATE SHEET OF PAPER. <input type="checkbox"/> YES <input type="checkbox"/> NO				HAS A TAX LIEN OR CIVIL SUIT BEEN FILED AGAINST APPLICANT OR ANY PRINCIPAL WITHIN THE LAST 6 YEARS? IF YES, EXPLAIN ON A SEPERATE SHEET OF PAPER. <input type="checkbox"/> YES <input type="checkbox"/> NO		

**TERMS:** In consideration of Techlight extending credit to the Applicant, the Applicant agrees to pay for all items delivered or services rendered to, or at the request of, the Applicant, in accordance with the terms of each invoice. Applicant agrees that each of the terms and conditions of sale stated on the invoices shall be a term of the contract of each sale from Techlight to the Applicant. Applicant acknowledges that a monthly service charge of the highest amount legally allowed in the state shall be made on all sums due Techlight which have not been paid by the assigned net terms following billing, and Applicant agrees to promptly pay said service charge. An additional service charge, computed on the same basis will be due and payable every 30 days thereafter. Waiver of any one or more service charges shall not be deemed to be a waiver of future service charges. Applicant further agrees that with regard to such service charges, Applicant and Techlight are parties to a written commercial contract. Should it become necessary to place the account with a collection agency or attorney, the Applicant agrees to pay all collection costs and attorney fees in addition to all other sums due. Applicant authorizes Techlight to obtain credit and financial information concerning the Applicant at any time and from any source. The undersigned warrants that the above agreement has been carefully read and that Applicant understands completely. Applicant also warrants that all information provided is true and correct.

PRINT NAME OF APPLICANT #1 \_\_\_\_\_ TITLE \_\_\_\_\_

PRINT NAME OF APPLICANT #2 \_\_\_\_\_ TITLE \_\_\_\_\_

SIGNATURE OF APPLICANT #1 \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF APPLICANT #2 \_\_\_\_\_ DATE \_\_\_\_\_