

DESCORE CREDIT APPLICATION

OPERATING NAME		TYPE OF BUSINESS	
FULL LEGAL NAME		ASSOCIATED COMPANIES	
COMPLETE ADDRESS		TELEPHONE ()	
		FACSIMILE ()	
TYPE OF COMPANY <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INCORPORATED	IN BUSINESS SINCE ⇨ UNDER PRESENT CONTROL SINCE ⇨ NUMBER OF EMPLOYEES ⇨	MONTHLY CREDIT REQUIREMENT ⇨ PST EXEMPTION NUMBER (Attach Copy) ⇨ SEND INVOICES & STATEMENTS BY <input type="checkbox"/> FACSIMILE <input type="checkbox"/> MAIL	
BANK	BRANCH	HOW LONG	
BANK CONTACT	TELEPHONE ()	ACCOUNT NUMBER	
<u>TRADE REFERENCE 1</u> & ADDRESS	COMPANY NAME	CONTACT	FACSIMILE () TELEPHONE ()
<u>TRADE REFERENCE 2</u> & ADDRESS	COMPANY NAME	CONTACT	FACSIMILE () TELEPHONE ()
<u>TRADE REFERENCE 3</u> & ADDRESS	COMPANY NAME	CONTACT	FACSIMILE () TELEPHONE ()
ACCOUNTS PAYABLE CONTACT	PRESIDENT/CEO		PURCHASING/SALES CONTACT
The undersigned on behalf of the above applicant agrees: 1. That the distributor retains a secured interest in product until all indebtedness for said product has been satisfied. 2. That interest may be charged on all past due accounts at the rate of 2% per month (24% per annum). 3. That a credit investigation may be carried out by the credit grantor and/or its agents in connection with the credit applied for or any renewal or extension. 4. To the release of credit information to the credit grantor and/or its agents concerning the applicant from anyone whom the applicant has financial relations. 5. Terms of sale shall be cod unless approved credit of net 30 days after date of invoice. I HAVE READ THE CONDITIONS OF SALE AND HEREBY AGREE TO THEM. I WARRANT THE INFORMATION ON THIS CREDIT APPLICATION TO BE TRUE. I AM AN OFFICER OF THE COMPANY AND AUTHORIZED TO MAKE ALL STATEMENTS ON ITS BEHALF.			
AUTHORIZED SIGNATURE		NAME	
TITLE		DATE	

CREDIT DECLINED

CREDIT APPROVED