



## CREDIT APPLICATION

(PLEASE TYPE OR PRINT)

APPLICANT (BUSINESS OR CORPORATE NAME)				APPLICATION DATE	
BUSINESS STREET ADDRESS			BILLING ADDRESS (STREET OR P.O. BOX)		
CITY	STATE	ZIP	CITY	STATE	ZIP
BUSINESS PHONE NO. ( )	YEAR ESTABLISHED	ESTIMATED MONTHLY PURCHASES	RESALE PERMIT OR SALES TAX NUMBER		
	NUMBER OF EMPLOYEES				
BUSINESS FAX NUMBER ( )	BUSINESS BUILDING IS: <input type="checkbox"/> OWNED <input type="checkbox"/> RENTED	NAME OF LANDLORD:	TYPE OF BUSINESS: SS# OR FED EIN NUMBER		
WE ARE ENGAGED IN THE BUSINESS OF:	LANDLORD'S ADDRESS AND TELEPHONE NO.		<input type="checkbox"/> SOLE PROPRIETOR NO.		
			<input type="checkbox"/> PARTNERSHIP NO.		
			<input type="checkbox"/> CORPORATION NO.		
PERSON TO CONTACT RESPONSIBLE FOR ACCOUNTS PAYABLE				AMOUNT OF CREDIT REQUESTED	

### OWNERS (IF APPLICANT IS A SOLE PROPRIETORSHIP OR PARTNERSHIP) OR OFFICERS (IF A CORPORATION)

NAME	TITLE	HOME ADDRESS	HOME PHONE NO. ( )
YEARS OF SERVICE	SS#		
NAME	TITLE	HOME ADDRESS	HOME PHONE NO. ( )
YEARS OF SERVICE	SS#		
NAME	TITLE	HOME ADDRESS	HOME PHONE NO. ( )
YEARS OF SERVICE	SS#		

### BANK OR SAVINGS AND LOAN ASSOCIATION

NAME	BRANCH ADDRESS	ACCOUNT NO.	TYPE OF ACCOUNT
NAME	BRANCH ADDRESS	ACCOUNT NO.	TYPE OF ACCOUNT

### APPLICANT'S PRINCIPAL SUPPLIERS AND TRADE REFERENCES (LIST AT LEAST THREE)

NAME	ADDRESS	CREDIT LIMIT	PHONE NO. ( )
NAME	ADDRESS	CREDIT LIMIT	PHONE NO. ( )
NAME	ADDRESS	CREDIT LIMIT	PHONE NO. ( )

HAS APPLICANT OR ANY OF ITS PRINCIPALS EVER FILED A PETITION IN BANKRUPTCY? IF YES, EXPLAIN ON A SEPARATE 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 SEPARATE SHEET OF PAPER. <input type="checkbox"/> YES <input type="checkbox"/> NO
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**Terms:** In consideration of Christmas City Printing Co., Inc. 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 Christmas City Printing Co., Inc. to the Applicant. Applicant acknowledges and agrees that if monthly payments are not paid when due, a monthly service charge of two percent (2%) of the full balance of the debt shall be payable to Christmas City Printing Co., Inc. Further, said service charge shall be payable for every month that a payment remains unpaid. 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 Christmas City Printing Co., Inc. 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 Christmas City Printing Co., Inc. to obtain credit and financial information concerning the Applicant at any time and from any source. The undersigned warrants that this document has been carefully read, that the undersigned is authorized to sign this document on behalf of Applicant and that Applicant knowingly and willingly accepts and agrees to all terms and conditions contained herein. The undersigned, as representative of Applicant, further warrants that the information contained above 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 \_\_\_\_\_