

# CREDIT APPLICATION



# TECHLIGHT

INNOVATION IN ILLUMINATION

PLEASE PRINT. MUST BE COMPLETELY FILLED OUT.

APPLICANT (BUSINESS OR CORPORATE NAME)						APPLICATION DATE					
BUSINESS STREET ADDRESS				BILLING ADDRESS (IF DIFFERENT)							
CITY		STATE		ZIP CODE		CITY		STATE		ZIP CODE	
BUSINESS PHONE NO.			BUSINESS FAX NO.		YEAR ESTABLISHED			RESALE PERMIT OR SALES TAX NO.			
E-MAIL			TYPE OF BUSINESS		SALES CONTACT			SS# OR FED EIN #			
CREDIT LINE REQUESTED				INITIAL ORDER VALUE				EST. MONTHLY PURCHASES			
INVOICING EMAIL (REQUIRED)						STATEMENT EMAIL					
<b>OWNERS (IF APPLICANT IS A SOLE PROPRIETORSHIP OR PARTNERSHIP) OR OFFICERS (IF A CORPORATION)</b>											
NAME			TITLE SS#		HOME ADDRESS				HOME PHONE NO.		
NAME			TITLE SS#		HOME ADDRESS				HOME PHONE NO.		
<b>PURCHASING CONTACT</b>											
NAME			TITLE			PHONE NO.			EMAIL ADDRESS		
<b>BANK OR SAVINGS AND LOAN ASSOCIATION</b>											
NAME			BRANCH ADDRESS				ACCT NO.		TYPE OF ACCT		
NAME			BRANCH ADDRESS				ACCT NO.		TYPE OF ACCT		
<b>APPLICANT'S PRINCIPAL SUPPLIERS (LIST AT LEAST THREE)</b>											
NAME			ADDRESS				PHONE #		EMAIL ADDRESS		
			ADDRESS 2				FAX #				
NAME			ADDRESS				PHONE #		EMAIL ADDRESS		
			ADDRESS 2				FAX #				
NAME			ADDRESS				PHONE #		EMAIL ADDRESS		
			ADDRESS 2				FAX #				
NAME			ADDRESS				PHONE #		EMAIL ADDRESS		
			ADDRESS 2				FAX #				
HAS APPLICANT OR ANY OF ITS PRINCIPALS EVER FILED A VOLUNTERY PETITION IN BANKRUPTCY? IF YES, EXPLAIN ON A SEPERATE SHEET OF PAPER.						YES <input type="checkbox"/> NO <input type="checkbox"/>					
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.						YES <input type="checkbox"/> NO <input type="checkbox"/>					

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 \_\_\_\_\_