

ZODAX

CREDIT APPLICATION

Company Name:	Type of Business:	No. of Years in Business:	
Street Address:	Phone:	No. of Years at Address:	
City:	State:	Zip:	Email:
Mailing Address (If different from above):	City:	State:	Zip:
Name of Owner (or authorized officers if a Corp.) Include Home Address & Phone #: 1.)	Social Security No:	Federal ID:	
2.)			
3.)			
Business Type: [] Individual [] Partnership [] Corporation	Resale Tax ID#:	D&B No.:	

TRADE REFERENCES

Individual Name / Company Name (No need to fill out if prepared references are provided)	Account Number	Phone Number	Fax Number

We certify that the above information is true and correct and we agree and are obligated to pay this account with your credit terms. We authorize you to verify this information and/or obtain additional information by securing data from a credit reporting agency. We understand that all past due balances will be subjected to 1.5 % finance charge per month. We further agree and are obligated to pay all cost of pre legal and legal collection efforts including, but not limited to, Collection Agency, Attorney's and /or Court's fees in the event of default.

Print Name: _____

Signature of Signee: _____

Date: _____

Company's Name: _____

Title: _____

BANK INFORMATION

Bank References	Contact Name	Account Number	Phone Number

PERSONAL GUARANTY

For good and valuable consideration, the undersigned (jointly & individually) agree to be personally liable for all indebtedness incurred by the above listed corporation or business entity. The undersigned (jointly & individually) further agree to be personally liable for all indebtedness based on the extension of credit to any other corporation or business entity with which the undersigned is or may be affiliated. If a default in the terms of payment occurs on any account on which the undersigned is or may be liable, and which is placed with an attorney or bonded collection agency, the undersigned (jointly & individually) agree and are obligated to pay all cost of pre legal and legal collection efforts including but not limited to Collection Agency, Attorney's and /or Court's fees.

Print Name: _____

Signature of Signee: _____

Date: _____

Company's Name: _____

Title: _____