

TERMINAL HARDWARE CO.824 EAST 8th STREET

Los Angeles, CA 90021-1804

(213) 624-4078 ♦ (213) 624-8667 (Fax)

APPLICATION FOR CREDIT**CREDIT TERMS:** _____**PART I APPLICANT (ALL QUESTIONS MUST BE ANSWERED)**NAME OF FIRM OR INDIVIDUAL
YEARS IN BUSINESS

MAILING ADDRESS

CITY

STATE

ZIP CODE

PHONE

SHIPPING ADDRESS

CITY

STATE

ZIP CODE

FAX

PROPRIETORSHIP _____

PARTNERSHIP _____

CORPORATION _____

TYPE OF BUSINESS

DATE OF INCORPORATION

PART II PRINCIPAL(S)

NAME AND TITLE

ADDRESS

PHONE

NAME AND TITLE

ADDRESS

PHONE

NAME AND TITLE

ADDRESS

PHONE

PART III BANK REFERENCE

BANK NAME

BANK ADDRESS

ACCOUNT NUMBER/S

BANK OFFICER OR DEPARTMENT

PHONE

PART IV CREDIT REFERENCES (3)

BUSINESS NAME

ADDRESS

PHONE#

FAX#

BUSINESS NAME

ADDRESS

PHONE#

FAX#

BUSINESS NAME

ADDRESS

PHONE#

FAX#

PART V AGREEMENT

I/We herein make application to TERMINAL HARDWARE, CO., for credit. If credit is granted, I/we hereby agree to pay in full within prescribed terms of: _____ I/We understand all invoices 30 days past due are subject to a service charge of 1 1/2% per month (18% per annum) until paid. Payment terms are subject to change without notice.

In the event payment is not made and this account is referred to an attorney and /or collection agency, I/we agree to pay all costs of collection of such amounts due including collection fees, attorney fees and court costs incurred.

I/We certify that all the information on this form is true and correct.

SIGNATURE (Owner, Corporate officer, Co-Partner)

TITLE

DATE

**824 East 8th Street
Los Angeles, Ca. 90021**

**Terminal
Hardware**



Please fill out additional information.

Engineers Name:

Engineering's Phone Number:

Engineering's Fax Number:

People authorized to purchase:

- 1.
- 2.
- 3.
- 4.
- 5.

Accounting Information:

Accountant's Name:

Accountant's Phone Number:

Accountant's Fax Number:

E-mail Address:

Do you require P.O. Numbers? ___NO ___YES

Taxable or Resale: If resale please provide us with Resale Certificate.