



7705 ALABAMA AVENUE
 CANOGA PARK, CA 91304
 TOLL FREE: 877-281-0000
 FAX: 818-884-5445

BUSINESS CREDIT APPLICATION

Billing Information

Full Legal Name	Bus. Tel #	Fax #	
Street Address	City	State	Zip
Shipping Address (if different)	City	State	Zip
How long have you been in business?	Type of business		
Annual Sales Volume	Estimated Yearly Purchased		

Business Credit Application

Principal Authorizes Officer	Title(s)		
Contact Person(s)	Duns Number		
Name of Parent Company			
Street Address	City	State	Zip

Bank Reference

Bank Name	Contact	Account #	
Bank Address	City	State	Zip
Telephone Number	Fax Number		

Trade References

1. Name	Contact		Account #	
1. Street Address	City	State	Zip	Tel.
2. Name	Contact		Account #	
2. Street Address	City	State	Zip	Tel.
3. Name	Contact		Account #	
3. Street Address	City	State	Zip	Tel.

THE UNDERSIGNED, AND EACH OF THEM, BY EXECUTION OF THIS CREDIT APPLICATION, AGREE THAT THEY SHALL PAY FOR ALL OUTSTANDING BALANCES PER TERMS AS AGREED BETWEEN THEM. IN THE EVENT THIS ACCOUNT IS EVER DELINQUENT PER THOSE TERMS, THE ACCOUNT WILL BE CHARGED A LATE CHARGE AT A SIMPLE INTEREST RATE OF EIGHTEEN PERCENT (18%) PER YEAR. THE UNDERSIGNED, AND EACH OF THEM, FURTHER AGREE THAT SHOULD ANY DISPUTE ARISE WHATSOEVER BETWEEN THE PARTIES RELATING TO ANY TRANSACTION STEMMING FROM THIS APPLICATION, THE VENUE OF SUCH DISPUTE SHALL BE THE SUPERIOR COURT OF CALIFORNIA FOR THE COUNTY OF LOS ANGELES. THE UNDERSIGNED, AND EACH OF THEM, ALSO ACKNOWLEDGE AND AGREE THAT THE PREVAILING PARTY OF ANY SUCH DISPUTE WILL BE ENTITLED TO ITS COSTS AND REASONABLE ATTORNEY'S FEES.

Auth. Signature	Print Name	Title	Date
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INDIVIDUAL PERSONAL GUARANTEE

I, [NAME] _____, RESIDING AT [ADDRESS] _____
 _____ HAVE READ THE FOREGOING AND FOR AND IN CONSIDERATION OF YOUR EXTENDING
 CREDIT AT MY REQUEST TO [COMPANY] _____ (HEREINAFTER REFERRED TO AS THE "COMPANY") OF WHICH I
 AM [TITLE] _____ HEREBY PERSONALLY GUARANTEE TO YOU THE PAYMENT AT [CITY] _____ IN THE STATE OF
 _____ ANY OBLIGATION OF THE COMPANY WHENEVER THE COMPANY SHALL FAIL TO PAY THE SAME. IT IS UNDERSTOOD THAT THIS
 GUARANTEE SHALL BE A CONTINUING AND IRREVOCABLE GUARANTEE AND INDEMNITY FOR SUCH INDEBTEDNESS OF THE COMPANY. I DO
 HEREBY WAIVE NOTICE OF DEFAULT, NON-PAYMENT AND NOTICE HEREOF AND CONSENT TO ANY MODIFICATION OF RENEWAL OF CREDIT
 AGREEMENT HEREBY GUARANTEED.

Auth. Signature	Print Name	Title	Date
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