



APPLICATION FOR CREDIT

BUSINESS ADDRESS

Business Name* _____ Contact _____
Address _____ Years in Business _____
City _____ State _____ Zip _____
Phone () _____ E-mail Address _____

* If subsidiary or division, list parent company name: _____
hereby applies for credit in accordance with the terms and conditions of Calculated Industries.

OWNERSHIP INFORMATION

Corporation Partnership Individual

Names, Addresses and Phone Numbers of Principal(s), Partner(s) or Proprietor(s):

1) _____
2) _____
3) _____
D & B No. _____

FINANCIAL INFORMATION / REFERENCES

Bank Name _____ Acct. No. _____ Officer _____
Address _____ Phone () _____

I hereby authorize the above listed Bank to release pertinent account information to Calculated Industries:

Signature / Signer (Please Print)

Trade References – List Business Name, Complete Business Address and Phone Number:

1) _____
2) _____
3) _____
4) _____

I certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of credit extended. I hereby agree to pay in full within the prescribed terms of sale of net 30 days from the date of invoice. I understand accounts past due are subject to a service charge of 1 1/2% per month, 18% annual rate. I also understand that past due accounts can result in our orders being held. I further agree to pay all reasonable collection costs, attorney's fees and court costs necessary to collect any balance due. Sales tax will be charged on all Nevada, Arizona, and Georgia accounts that do not have a completed resale card on file or accompanying this application.

Signed _____ Title _____ Date _____

The information contained in this document is confidential, privileged and non-disclosable. If the recipient of the document is not the addressee or the person responsible for delivering the message to the addressee, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone collect and return the original message to our firm at the address below. We will reimburse you for postage. Thank you.

RESALE CARD INFORMATION

Name of Purchaser _____

Address of Purchaser _____

I HEREBY CERTIFY that I hold valid seller's permit no. _____ State _____

issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling _____

_____;

that the tangible personal property described herein which I shall purchase from **Calculated Industries** will be resold in the form of tangible personal property; provided, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property.

Description of property to be purchased: _____

Printed name of Purchaser or Authorized Agent

Title

Signature of Purchaser or Authorized Agent

Date

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