



Credit Application

Company Name			Yea	Year in business	
Billing address		Yea	Years at location		
City				dit requested	
Phone		Fax			
AP contact		_ Purchasing	contact		
AP phone		Purchasing	g phone		
E-mail		Fax			
☐Corporation ☐Partnership ☐	Proprietorshi	ip Type of Bu	siness		
Are you taxable? ☐Yes ☐No	PO require	ed? ∐Yes [□No D&B #:		
Officers/Partner Names		Title		Phone	
Authorized Signature					
Print name					
Terms for open account are net 30 days f for payments received past the due date. attorney's fee. (including appeals) Venue to Multicom, Inc. terms and conditions as pass, or convey until all amounts including	Annual percentation provided to purc	age rate of 18%. under this credit haser and publis	The purchaser agrees application shall be pro	to pay all costs of collect per only in Orange Coul	tion including a reasonable nty, Florida. Sales are subject
Signature of principal			Date		
Print name					
The undersigned hereby personally guara per year plus all costs of collection includi proper only in Orange County, Florida.					
Signature of principal			Date	· · · · · · · · · · · · · · · · · · ·	
Print name				· · · · · · · · · · · · · · · · · · ·	



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Trade References (please provide fax numbers if available) Company Name _____ Address _____ Address _____ Phone _____ Phone ____ Fax _____ Account # _____ Account # Company Name _____ Company Name _____ Address Address Phone _____ Phone _____ Fax _____ Fax _____ Account # _____ Account # _____ Bank reference Bank Name _____ Phone _____ Address ____ Contact _____ Account #

Please provide a resale certificate or exemption certificate for any states that you are registered in.