

CREDIT APPLICATION

Acct. Rep. _____

Business Name _____ Phone # _____

Bill To Address _____

Ship To Address _____

Accounts Payable Contact _____ A/P Phone # _____ Fax # _____

E-mail Address _____

Is this business affiliated with any other companies? Please list _____

Company Owners/Officers _____

Name

Title

Name

Title

Bank Information:

Name _____

Account # _____

Address _____

Phone # _____

Contact _____

Trade References:

1. Name _____

City/State _____

Account # _____ Phone # _____

Fax # _____

2. Name _____

City/State _____

Account # _____ Phone # _____

Fax # _____

3. Name _____

City/State _____

Account # _____ Phone # _____

Fax # _____

Will your purchases be tax exempt?

Tax Exempt # _____

If so, please fill in your tax-exempt number.

* Please attach a copy of your Tax Exempt Form.

Signature _____

Printed Name _____

Title _____

Date _____

Names Of Persons Authorized To Charge On This Account:

Note: Any changes to this list must be submitted in writing.

Our terms are Net 15 days. If you disagree with anything on the invoice, it is your responsibility to contact MapleTronics Computers to resolve the problem before the invoice becomes past due. Past due accounts may be subject to late charges and credit hold.

I/We certify that the above information is true and correct and I/We agree to pay this account in accordance with your credit terms. I/We understand that a service charge may be assessed on past due invoices and I/We agree to pay such service charges when billed. I/We agree to pay for all charges incurred by those authorized to charge on this account and agree that any additions or deletions will be made in writing.

In the event that this account is placed in the hands of an attorney or collection agency for collection, I/We agree to pay all attorney or collection fees and court costs incurred.

Signed _____ Position _____ Date _____

Signed _____ Position _____ Date _____

(If a Partnership, all partners must sign. If a Corporation, an authorized officer must sign.)

PERSONAL GUARANTEE FOR CORPORATE ACCOUNTS
 (Must be signed for credit approval)

In consideration for the credit extended to the above listed corporation, the undersigned guarantees and agrees to be personally liable for all indebtedness incurred by the corporation through any of its authorized agents listed above.

Signed _____ Date _____

Signed _____ Date _____

Finance charges of 1.5% per month may be applied to balances past 30 days.

CONDITION OF TERMS

MapleTronics' payment terms are **Net 15 days**. All payments are due 15 days from the date of the invoice.

The following steps will be taken if the invoice becomes past due:

- A reminder will be sent in the form of:
 - Statement
 - E-Mail
 - Telephone call
- A letter will be sent with a date deadline for payment.
- A letter will be sent to our company attorney for legal action.

I understand that if I have any problems with the merchandise or the service I have purchased from MapleTronics, I am to contact MapleTronics by telephone, e-mail or letter before the invoice is 15 days old.

I, _____, an
authorized representative of

have read and agree with the terms written above.

Date _____