



S T A T I O N

Customer Credit Application

In order to consider your request for credit terms or C.O.D. "Company Check", please provide all of the information requested below.
Sign (please print your name under your signature) and date at the bottom.

Trade Name: _____ Contact: _____
 ___ Corporation ___ Sole Proprietorship ___ Partnership Tax ID # _____ D&B # _____
 Corporate Name (if applicable): _____ Years in Business _____
 Bill to: _____ Ship to: _____

 Phone: _____ Fax: _____
 E-mail: _____ URL: _____

BANK REFERENCE

Bank Name: _____ Branch: _____ Phone : _____
 Contact: _____ Account Name: _____
 Account #: _____ Account Type: ___ Checking ___ Savings

TRADE REFERENCES (Must Have 4 References)

Firm Name: _____ Phone: _____
 Address: _____ Account #: _____
 _____ Contact: _____

 Firm Name: _____ Phone: _____
 Address: _____ Account #: _____
 _____ Contact: _____

 Firm Name: _____ Phone: _____
 Address: _____ Account #: _____
 _____ Contact: _____

 Firm Name: _____ Phone: _____
 Address: _____ Account #: _____
 _____ Contact: _____

SALES TAX

The undersigned hereby certifies that merchandise purchased on each order is purchased for resale as tangible personal property, or resale of a service subject to tax.

OUR TAX RESALE NUMBER IS _____ (MUST INCLUDE OR WILL BE CHARGED APPLICABLE TAX)

CREDIT AGREEMENT

The entire balance of all credit accounts are due and payable according to the terms of sale of each invoice. A late charge of 1 1/2% per month with a maximum of 18% per annum will be assessed on the past due balance. In the event that a delinquent account is placed in the hands of a licensed collector or attorney for collection, or suit is instituted on the account of the account and the assessed finance charges, the undersigned agrees to pay all costs and reasonable collectors or attorney's fees. The undersigned agrees that all credit hereafter extended shall be deemed subject to the terms herein agreed upon.

This agreement entered into on _____ (date) _____ (customer signature/title)

I HEREBY CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS CORRECT. IF THIS APPLICATION IS ACCEPTED, I AGREE TO THE TERMS AND CONDITIONS OF SWIMSUIT STATION, INC. THE UNDERSIGNED HERE PERSONALLY GUARANTEES THE ABOVE CUSTOMER HEREBY UNCONDITIONALLY GUARANTEERING THE PAYMENT OF ANY AND ALL OBLIGATION OF PAYMENTS. INCLUDING BUT NOT LIMITED TO INTEREST, ATTORNEYS AND ALL OTHER COST OF COLLECTION.

CUSTOMER SIGNATURE _____ DATE _____