



CREDIT APPLICATION

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|------------------------------|-------------------------------|
| Authorized Employees: | Authorized Signatures: |
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| | |

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|--------------------------------------|------------|
| Account Payables Information: | |
| Name: | Telephone: |
| Fax: | E-mail: |

| | |
|-----------------------------|-------------|
| Account Information: | |
| Account Name: | Telephone: |
| Address: | |
| City: | State: Zip: |

Type of Business: Individual: [] Corporation: [] Partnership: [] Sole Proprietorship: [] Other: []

Year Established: DNB# Resale # Federal Tax # State Tax #

Has the company ever filed for bankruptcy? Yes [] No []

Has the company changed names? Yes [] No [] If Yes, previous name:

Personal Information

Owner Name: Telephone:

Home Address: City: State: Zip:

Home Phone: Driver's License No.:

(Note: Please provide same information on reverse side of this form for more than one owner)

Bank Information:

Bank Name: Telephone:

Bank Address: City: State: Zip:

Account Number: Account Number:

Visa/MasterCard: Expiration Date:

Trade References: (include address, city, state, zip code and telephone number)

- 1)
- 2)
- 3)

Terms & Conditions: By signing this Application For Credit, your company authorizes Dynamic Concepts to obtain information for the purpose of establishing a corporate account. The signature below is that of an individual who is authorized by his/her company to sign this Application For Credit. A service charge of 1.5% monthly will be charged on past due balances. Customer agrees to pay ALL collection fees, legal fees, and costs related to the collection of their past due account. All past due balances may be charged to my VISA/MASTERCARD including all finance or service charges.

| | |
|-------------------|--------------|
| Signature: | Date: |
| Approved By: | Date: |
| Comments: | |

