



Term Credit Application Form

Company name _____ DBA (if different) _____

Company Address _____

Contact person _____ Email address _____

Phone _____ Fax _____ Federal tax ID or Social Security #: _____

Type of business _____ No. of employees _____

Date business established _____ D&B No. (if you have one) _____

Types of products you will purchase _____ Amount of credit requested \$ _____

COMPANY TYPE (select one)

CORPORATION- State of incorporation _____

Names, titles, and addresses of your three chief corporate officers

Name	Title	Address

SOLE PROPRIETORSHIP- Names, title, and address of the owner

Name	Title	Address

- Are you a reseller? No Yes (please attach a copy of your reseller permit)
- Are you sales tax exempt? No Yes (please attach a copy of tax exempt certificate)
- Have you ever had credit with us before? No Yes (if yes, under what name _____)
- Purchase order required? No Yes (purchase order is required for term customer)

Authorized purchasers:

Address: 2075 Zanker Road, San Jose, CA 95131, USA

sales@finetec.com www.finetec.com

Phone: 408-943-9193 Fax: 408-943-9198

**TRADE REFERENCES**

Reference #1: Name _____ Phone _____

Address _____

Reference #2: Name _____ Phone _____

Address _____

Reference #3: Name _____ Phone _____

Address _____

BANK REFERENCES

Bank#1: Name of bank _____ Account # _____

Contact person# _____ Phone # _____

Address _____

Bank#2: Name of bank _____ Account # _____

Contact person# _____ Phone # _____

Address _____

I represent that the above information is true and is given to induce to extend credit to the applicant. My company and I authorize to make such credit investigation as sees fit, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to any and all information concerning the financial and credit history of my company and myself.

I have read the terms and conditions stated below and agree to all of these terms and conditions.

Authorized signature: _____

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Printed name: _____ Title: _____ Date: _____