

# Application For Credit

Celesco Transducer Products, Inc.

20630 Plummer Street • Chatsworth, CA 91311

tel: 800.423.5483 • 818.701.2750 • fax: 818.701.2799

Application is hereby made for the extension of credit:

**BUSINESS NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**D & B#:** \_\_\_\_\_

**FAX:** \_\_\_\_\_

**Tax ID#:** \_\_\_\_\_

**eMAIL:** \_\_\_\_\_

**BILLING ADDRESS**  
\_\_\_\_\_  
*(Street • PO Box)*  
\_\_\_\_\_  
*(City)*  
\_\_\_\_\_  
*(State)*  
\_\_\_\_\_  
*(Zip)*

**SHIPPING ADDRESS**  
\_\_\_\_\_  
*(Street)*  
\_\_\_\_\_  
*(City)*  
\_\_\_\_\_  
*(State)*  
\_\_\_\_\_  
*(Zip)*

**ACCOUNTS PAYABLE DEPT**  
\_\_\_\_\_  
*(Contact)*  
\_\_\_\_\_  
*(Title)*  
\_\_\_\_\_  
*(Phone No.)*

**BANK**  
\_\_\_\_\_  
*(Bank Name / Branch)*  
\_\_\_\_\_  
*(Address)*  
\_\_\_\_\_  
*(Bank Account No.)*  
\_\_\_\_\_  
*(Bank Contact) (Phone No.)*

**FORM OF BUSINESS:** *(Check Applicable Box)*

- Proprietorship       Partnership       Distributor       Other: \_\_\_\_\_  
 Corporation       Broker       Trading Co.

**SOCIAL SECURITY #:** \_\_\_\_\_  
*(Of Owners if not a Corporation)*

**LENGTH OF TIME COMPANY HAS BEEN IN BUSINESS** \_\_\_\_\_ *(YEARS)*

**TRADE REFERENCES:** *(Minimum of 3 Are Requested)*

Vendor Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_

## THIS IS NOT A PERSONAL GUARANTEE:

I hereby represent that I am authorized to submit this application on behalf of the customer named above, and that the information provided is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize to investigate the references listed pertaining to my/our credit and financial responsibility. It is agreed and understood that all necessary collection and legal expenses and interest (at 18% per year) may be charged to debtor in the event of default or failure to pay for goods sold and delivered. I further represent that the customer applying for credit has the financial ability and willingness to pay all invoices with established terms.

By: \_\_\_\_\_ *(Title)* \_\_\_\_\_ *(Date)*

By: \_\_\_\_\_ *(Title)* \_\_\_\_\_ *(Date)*

**Exempt Organization Sales Tax Certificate No.:** \_\_\_\_\_ Expires: \_\_\_\_\_

*(Office Use Only)*

**celesco**