



Trek Inc - Account Receivable
CREDIT REQUEST APPLICATION

1. COMPANY INFORMATION

Note: * indicates Required Field.

Customer # *	:	_____	State/Province *	:	_____
Company Name *	:	_____	Zip/Postal Code *	:	_____
Trade/DBA Name	:	_____	Country *	:	_____
Address 1 *	:	_____	Phone *	:	_____
Address 2	:	_____	Fax	:	_____
City *	:	_____		:	_____

2. COMPANY IDENTIFICATION

Federal Tax ID	:	_____	DUNS Number	:	_____
----------------	---	-------	-------------	---	-------

3. SHIPPING PREFERENCE

Location Preference : Company Name OR Trade/DBA Name

4. BUSINESS PROFILE

Year Established *	:	_____	No of Employees	:	_____
State/Province of Incorporation*	:	_____	Annual Sales	:	_____

Ownership

No of Owners or Partners : _____

#1

Name *	:	_____	Home Address *	:	_____
Title	:	_____	Cell Phone *	:	_____
Ownership *	:	_____	Home Phone	:	_____

#2

Name	:	_____	Home Address	:	_____
Title	:	_____	Cell Phone	:	_____
Ownership	:	_____	Home Phone	:	_____

#3

Name	:	_____	Home Address	:	_____
Title	:	_____	Cell Phone	:	_____
Ownership	:	_____	Home Phone	:	_____

#4

Name : _____ Home Address : _____
Title : _____ Cell Phone : _____
Ownership : _____ Home Phone : _____

#5

Name : _____ Home Address : _____
Title : _____ Cell Phone : _____
Ownership : _____ Home Phone : _____

5. APPLICANT'S INFO

Title : _____ Work Phone : _____
First Name * : _____ Email * : _____
Last Name * : _____

Account Payable (AP) Contact Info:

Name * : _____ Email * : _____
Phone * : _____

6. CREDIT REQUEST**(Credit Terms: Net 30, Net 45, Net 60, Net 90 and COD)**

Credit Amount Requested * : _____ Purchase Order Required? : Yes No
Credit Terms * : _____ Any Pending Order? : Yes No
Planned Monthly Purchase * : _____ Pending Order Amount : _____

7. BANK REFERENCE

Bank Name * : _____ Phone # * : _____
Address * : _____ Fax # : _____
City * : _____ Bank Account # * : _____
State * : _____ Contact Person * : _____
Zip/Postal Code * : _____ Contact Email * : _____

8. TRADE REFERENCE**#1**

Company Name * : _____ Phone # * : _____
Contact Name * : _____ Fax # : _____
Address * : _____ Email * : _____

#2

Company Name * : _____ Phone # * : _____

Contact Name * : _____ Fax # : _____

Address * : _____ Email * : _____

#3

Company Name * : _____ Phone # * : _____

Contact Name * : _____ Fax # : _____

Address * : _____ Email * : _____

9. TAX EXEMPT OR RESALE CERTIFICATETax Exempt or Resale Certificate : Yes No (If Yes then fill out below details and send copy with application.)Certificate Type : _____ Has Expiration Date? : Yes No

Certificate # : _____ Expiration Date : _____

State / Province : _____

10. PERSONAL GUARANTEE Yes No (If Yes then fill out below details.)

Gaurantor's Print Name : _____ SSN : _____

Date : _____

Personal Guarantee:

This Personal Guarantee and the rights and obligations of the parties hereunder shall be governed by and interpreted, construed, and enforced in accordance with the laws of the State of Michigan, without reference to or effect being given to choice of law principles. Any proceeding arising out of or relating to this Personal Guarantee shall be brought in the courts of the State of Michigan, County of Oakland, or, if it has or can acquire jurisdiction, in the United States District Court for the Eastern District of Michigan. Guarantor, for itself and its successors and assigns, hereby agrees to and irrevocably (i) submits to the jurisdiction of the state and federal courts in the State of Michigan as identified herein, (ii) waives, to the fullest extent permitted by law, any objection that it may now or in the future have to the laying of venue of any proceeding arising out of or in connection with this Personal Guarantee brought in the state or federal courts in the State of Michigan as identified herein, (iii) waives any objection it may now or hereafter have as to the venue of any such action or proceeding brought in such court or that such court is an inconvenient forum, and (iv) agrees that any legal proceeding against any party to the Personal Guarantee arising out of or in connection with the Personal Guarantee shall be brought exclusively in the state or federal courts in the State of Michigan as identified herein. This provision may be filed with any court as written evidence of the knowing and voluntary irrevocable agreement between the parties to waive any objections to jurisdiction, to venue or to convenience of forum. Guarantor acknowledges that these waivers are a material inducement to Obligees' agreement to enter into the Personal Guarantee.

11. AUTHORIZED

We hereby apply for credit and affirm financial responsibility, ability and willingness to pay invoices in accordance with published terms. The above information is warranted to be true and complete. We hereby authorize you to verify and collect information on us, including but not limited to bank references, trade credit references, consumer and/or commercial credit reports. We agree to pay a monthly finance charge of 1.50% on all past due balances. We agree to pay all costs of collection and litigation on this account in accordance with the laws of the Creditor's State of Incorporation. We agree that all decisions with respect to the extension or continuation of credit shall be in the sole discretion of the Creditor.

Authorized Sign : _____ Authorized By : _____

Date : _____

If you have any question, feel free to contact our A/R specialist. Jeneane Crooms (248) 668 2107

Email or fax document to
Email: jcrooms@trekdirect.com Fax: (248) 960 1168