

Company Name: _____

Company Address: _____

City: _____ **State** _____ **Zip:** _____

Proprietorship **Partnership** **Corporation*** **State *** _____

Taxable **Tax Exempt Number*** _____ ***Attach Certificate**

Contact Name: _____ **Title:** _____

Phone Number: _____ **Fax Number** _____

Type of Business: _____ **Years in Business** _____

Federal ID Number: _____

Bank: _____

Bank Contact: _____ **Phone Number:** _____

Account Type: _____ **Account Number:** _____

Credit Requested: \$ _____

Please supply three business/trade references:

Company: _____ **Contact:** _____

Phone: _____ **Fax:** _____

Company: _____ **Contact:** _____

Phone: _____ **Fax:** _____

Company: _____ **Contact:** _____

Phone: _____ **Fax:** _____

TERMS AND CONDITIONS

1. Payment on items are Net 30 days from date of shipment.
2. All amounts not paid as agreed herein shall accrue interest at the rate of 1.5% per month (18% per annum) or the highest rate permissible by law, which ever is less.
3. Applicant agrees to pay a service charge of \$25.00 for each check returned unpaid.
4. In the event of default in payment of any amount due hereunder, and if the account is placed with an outside attorney for collection, applicant agrees to pay all reasonable collection costs, attorney fees and court costs.
5. All deduction claims must accompany invoice payment and be detailed in writing. No claim will be allowed if received more than 60 days after shipment.
6. No returns will be accepted without the prior authorization of Ginmar Corporate Promotionals, Inc.

I certify that all the information in this credit application is complete, factual, and correct, and I understand that Ginmar Corporate Promotionals, Inc. will rely on the accuracy of this information for any credit that may be extended. Ginmar, Inc. is hereby expressly authorized to contact any parties listed herein, including banks, and to verify any information contained in this credit application. I further understand that applicable state sales/use tax will be charged if "Tax Exempt Certification" does not accompany this application.

Date: _____ **Authorized Signature** _____ **Title:** _____