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 6627 E. Mission Spokane, WA 99212 (509) 534-1278 Fax (509) 534-0311

Commercial Credit Application

| | | | |
|---|--------------|------------------------------------|--------------|
| FIRM: _____ | | DATE: _____ | |
| ADDRESS: _____ | | | |
| CITY: _____ | STATE: _____ | ZIP: _____ | PHONE: _____ |
| TYPE of BUSINESS: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Individual | | | |
| HOW LONG in BUSINESS: _____ | | HOW LONG at PRESENT ADDRESS: _____ | |
| PREVIOUS ADDRESS: _____ | | | |
| CITY: _____ | STATE: _____ | ZIP: _____ | PHONE: _____ |
| TYPE of BUSINESS: _____ | | | |
| LOCATION of BUSINESS: <input type="checkbox"/> Mall <input type="checkbox"/> Store Front <input type="checkbox"/> Home | | | |

CREDIT REFERENCES

| NAME | ADDRESS | PHONE |
|------|---------|-------|
| | | |
| | | |
| | | |
| | | |

BANK REFERENCES

| NAME | BRANCH | PHONE |
|------|--------|-------|
| | | |
| | | |
| | | |

PRINCIPLES of FIRM

| NAME | ADDRESS | PHONE |
|------|---------|-------|
| | | |
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| | | |

TERMS

Notice: The following is provided for your information. Please understand these terms before signing this agreement.

Payment is due on all invoices charged against credit accounts with Jayeness Moulding Company on the 30th day from the shipment of product. Interest will accrue at 1.5% monthly on unpaid balances beginning on the 31st day from the date of invoice. Invoice balance will be discounted 2% if paid within 10 days via cash, check, or money order. The customers signing below agree to these terms and accept personal liability for debts incurred. Furthermore, said customers will bear all costs of collection and litigation in the event that Jayeness Moulding Company, in reasonable judgement, deems it necessary to begin collections efforts on overdue balances.

CUSTOMER SIGNATURES

| NAME | TITLE | SIGNATURE | DATE |
|------|-------|-----------|------|
| | | | |
| | | | |
| | | | |
| | | | |

Approved By: _____

Date: _____