



CREDIT APPLICATION

Bus.: (800) 756-2184

1315 E. Watson Center Rd., Carson, CA 90745

www.studiomoulding.com

Company Name _____ Phone _____

Ship to Address _____ Billing Address _____

City _____ City _____

State _____ Zip _____ State _____ Zip _____

Individual Partnership Corporation In Business Since _____

Resale # _____ Billing contact _____
"Per your State a signed Resale Tax Certificate is required"

E-mail Address _____ ANTICIPATED MONTHLY PURCHASES \$ _____

COMPANY PRINCIPALS:

Owner's Name _____ Phone _____

Address _____

Owner's Name _____ Phone _____

Address _____

Owner's Name _____ Phone _____

Address _____

Individual(s) Authorized to Place Orders: (If other than those listed above.)

BANK REFERENCE:

Bank Name _____ Checking Acct. # _____

Address _____ Savings Acct. # _____

Officer _____ Phone _____

TRADE REFERENCES: *

(1) Name _____ Acct. # _____ Phone _____

Address _____ Email _____

City _____ State _____ Zip _____ Attn: _____

(2) Name _____ Acct. # _____ Phone _____

Address _____ Email _____

City _____ State _____ Zip _____ Attn: _____

(3) Name _____ Acct. # _____ Phone _____

Address _____ Email _____

City _____ State _____ Zip _____ Attn: _____

In order to establish credit, the reverse side must be completed and signed.

Credit Application for _____ (Complete if Faxed.)

Parties hereby agree that all purchases made are subject to the following terms and conditions:

1. The undersigned purchaser(s) hereby agree(s) that all amounts due Studio Moulding are normally payable thirty (30) days from the date of purchase unless other terms have been agreed to by the parties.
2. Accounts unpaid beyond thirty (30) days will accrue a 1 ½% per month finance charge.
3. The undersigned purchaser agrees to pay Studio Moulding a service charge of \$37.00 for all checks returned by their bank. This applies to each occurrence.
4. The undersigned purchaser agrees to notify Studio Moulding by email / mail of any change in ownership of the their business and further agrees to be liable for all purchases by the new owner should the undersigned fail to comply with said notification.
5. The undersigned purchaser hereby acknowledges that the goods and/or services purchased from Studio Moulding are not payable in installments, but are payable in full as stated herein.
6. In the event that this guarantee of payment is executed by more than one person, then in such event, the liabilities and obligations of the undersigned hereunder shall be jointly and severally and the relative words herein shall be read as if written in plural.

I/we hereby acknowledge that Studio Moulding retains title to all merchandise purchased by me/us, until fully paid for and I/we personally guarantee payment of all indebtedness including legal and court fees to collect same. The submission of this application for credit implies that the applicant(s) grants to Studio Moulding the right to investigate the applicant(s) credit including, but not limited to, the references listed.

Signature _____ Social Security # _____ Date _____

Signature _____ Social Security # _____ Date _____

Signature _____ Social Security # _____ Date _____

After completing this Credit Application, please mail or email all pages to:

Mail: **Studio Moulding, Inc.**
1315 E. Watson Center Rd.
Carson, CA 90745

www.studiomoulding.com

Email: AR@studiomoulding.com