



APPLICATION FOR CREDIT

Company Name & Billing Address: _____

Street number & name: _____

City, State, Zip Code: _____

Telephone Number: _____ Fax Number: _____

DUNS #: _____ Federal Tax ID #: _____

Business Type (S Corporation, C Corporation, Sole Proprietor, General Partnership): _____

Date Business Started: _____ Years in Business: _____

Accounts Payable Contact Name: _____ Phone Number: _____

Bank Reference:

Bank Name: _____ Account #: _____

Contact Name: _____ Phone Number: _____

Trade/Vendor References:

Name: _____

Address: _____

Contact Name: _____ FAX #: _____ Phone #: _____

Name: _____

Address: _____

Contact Name: _____ FAX #: _____ Phone #: _____

Name: _____

Address: _____

Contact Name: _____ FAX #: _____ Phone #: _____

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 Online Commerce Group, LLC dba Umbrella Source to investigate the references listed and to run a credit report pertaining to my/our credit and financial responsibility.

I understand that if credit is approved, all billed amounts are due Net 30. Any amounts not paid may be subject to an interest charge of 1 1/2 % per month, the interest rate will be the lower of whatever the rate is or the highest rate allowed by law. Any disputed items must be brought to our attention within 30 days of the invoice date.

In case suit shall be brought for the collection hereof or the sum has to be collected upon demand by an attorney, the customer agrees to pay reasonable collection and/or attorney's fee in making such collections.

All paperwork is imaged copies that are considered legal documents, as if they were originals. Statutes are on record that cite this admissibility criterion as evidenced in the UPC (Uniform Photographic Copies of Business and Public Records as Evidence Act UPA28USCpl732)

Signed By: _____ Date: _____ Title: _____
(Must be signed by an Officer of the Company)

The owner/principle guarantees the payment of balances owing on this account.

Signed By: _____ Date: _____ Print Name: _____
(Must be signed by an Officer of the Company)

Please advise us of what paperwork is required for prompt payment? _____