

# APPLICATION FOR CREDIT PRIVILEGES

**NOTE:** In order to be checked for credit, a \$500 order must accompany this dealer application, or a cumulative total of \$500 must have been purchased in the last 60 days.

**TRADE REFERENCES:** (Your credit limit with trade references should be at least as high as you are requesting from Dragon Distributing). A minimum of four (4) references are required.

1. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

3. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

4. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

## CREDIT REQUIREMENTS

## IMPORTANT: PLEASE ANSWER THE FOLLOWING QUESTIONS

Credit Amount Requested \$ \_\_\_\_\_ Your Authorizing Purchasing Agent \_\_\_\_\_

Would you be willing to:

1. Sign a personal Guaranty \_\_\_\_\_ Yes \_\_\_\_\_ No

## IF YOU HAVE REQUESTED A CREDIT LINE LARGER THAN \$3,500 PLEASE ATTACH A CURRENT FINANCIAL STATEMENT.

The undersigned hereby certifies that above information is true and current, and in addition to the foregoing, the undersigned promises to pay for all purchases in accordance with Dragon Distributing's terms of sale. If at any time the undersigned is unable to pay for said purchases when due, the undersigned agrees to pay, and authorizes Dragon Distributing to bill my account with interest computed at 2% per month (24% annum) on any past due amount or the maximum prevailing rate allowable under the law of state governing the transactions contemplated by this credit application. If it becomes necessary for Dragon Distributing to incur collection costs for any amount due under this agreement, the undersigned promises to pay additional collection costs including reasonable attorney fees. Upon acceptance by Dragon Distributing, this application will constitute a sales and purchase agreement.

Facsimile transmission of signature shall be enforceable against party signing.

Signature (Owner, Officer or Authorized Agent) \_\_\_\_\_

Company (Legal Name) \_\_\_\_\_

FOR OFFICE USE ONLY: Date opened \_\_\_\_\_ Limit \_\_\_\_\_ Notified \_\_\_\_\_

By \_\_\_\_\_ Salesperson \_\_\_\_\_ Type \_\_\_\_\_ 1/01

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