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 Huntington Beach, CA 92648
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South Shore Products

APPLICATION FOR CREDIT

Note : The Seller's permit must accompany this agreement regardless of the term. The SIGNATURE of an officer of the company is REQUIRED, prior to receiving an account. Failure to fill out all application areas may delay the credit approval.

Company name : _____		Phone : _____	
Billing Address : _____		City : _____ State : _____ Zip : _____	
City : _____ State : _____ Zip : _____		Fax : _____	
Shipping Address : _____		Phone : _____	
City : _____ State : _____ Zip : _____		Fax : _____	
Website : _____			
Ownership : <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship			
Federal Tax ID/EIN or Social Security No. : _____		Seller's Permit # : _____	
Type of business : _____		Terms Requested : _____	
Account Payable contact : _____			
Phone : _____		Email : _____ @ _____	

Bank Information

Checking	Other (Saving, Loan, Line of Credit)
Bank Name : _____	Bank Name : _____
Address : _____	Address : _____
City : _____ State : _____ Zip : _____	City : _____ State : _____ Zip : _____
Contact Name : _____ Phone : _____	Contact Name : _____ Phone : _____
Account # : _____ Fax : _____	Account # : _____ Fax : _____

Trade References

Company Name : _____ Address : _____ _____ Contact Name : _____ Phone : _____ Email (required): _____	Company Name : _____ Address : _____ _____ Contact Name : _____ Phone : _____ Email (required): _____
Company Name : _____ Address : _____ _____ Contact Name : _____ Phone : _____ Email (required): _____	Company Name : _____ Address : _____ _____ Contact Name : _____ Phone : _____ Email (required): _____

_____ ("Customer") agrees to pay all penalties/service charges, reasonable attorney/court fees incurred in the collection of its past due account, at the maximum allowed by law. The above information is for purpose of obtaining credit and it is warranted to be true under penalty or perjury.

Officer Signature : _____ Title : _____

Print Name : _____ Date : _____