

If you are submitting a prepared document listing trade & bank references, this application must be signed and submitted with that document. Also, please answer any questions marked with double asterisks. Please fax completed application to Jan Simmons at 775-414-7277 as soon as possible.

Application for Credit

**Date

**Full corporate name:

**D/B/A or Trade name:

Street address

Phone

City

State

Zip

Fax

**Full name of owner or owners (or authorized officers of the corporation) list home address & zip code for partners or individual

**Person to contact regarding payments (include e-mail address):

**Person to contact regarding credit approval status (include e-mail address):

**Business structure: Individual Partnership Corporation (State; _____) LLC or Ltd.

Indiana sales tax status: Taxable Exempt (must complete attached form ST-105 and return)

Approximate credit line desired \$

**Purchase Order Required? Yes No

(PLEASE ATTACH FINANCIAL STATEMENT)

Type of business

Year established

Estimated annual sales

TRADE REFERENCES (LIST THREE)

Name	Address (No P.O. Boxes)	Phone
1.		()
2.		()
3.		()

Name of Bank

Savings/Checking Account No.

Street Address

Phone

City

State

Zip

Name of Bank

Loan Account No.

Account Officer

Street Address

Phone

City

State

Zip

Applicants' signature attests financial responsibility, ability and willingness to pay our invoice in accordance with the approved terms.

The above information is for the purpose of obtaining credit and is warranted to be true. I/we hereby authorize EP Graphics, Inc. to investigate the references listed pertaining to my/our credit and financial responsibility.

By

(authorized signature)

(Print name & title)

*Applicant agrees that future transactions between applicant and EP Graphics shall be pursuant to the Terms and Conditions of Sale now or hereafter established by EP Graphics which Terms and Conditions are incorporated by reference. These include, but are not limited to, Applicant's agreement to pay late fees at the rate of 1 1/2 % per month on all past due invoices. Applicant also consents to in personam jurisdiction in the State of Indiana, and agrees that all disputes requiring judicial intervention shall be brought in the courts of the State of Indiana.