



CONFIDENTIAL
Application for Credit Form

Please fill out Credit Application and fax to:

310-937-7219

2110 Artesia Blvd Suite B-202 Redondo Beach, CA 90278
Tel: 310-318-9810 Fax: 310-937-7219
www.bostonamplifier.com



Credit Application

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Legal Company Name _____

All DBA's _____

Address: _____

Phone # _____ Phone # _____ Fax# _____

Business Location () Own () Rent How Long at Location? _____ How many Locations? _____

Type of Enterprise () Corporation in the State of ____ () Partnership () Sole Proprietorship () Other

Date Est. _____ D&B# _____ Annual Sales Volume _____

Corporate ID# _____ CA Resale # _____

BANK INFORMATION

Bank Name _____ Contact Name _____ Phone _____

Address _____ City _____ State & Zip _____ Fax _____

Account #'s: Checking _____ Savings _____ Loan _____

Bank Name _____ Contact Name _____ Phone _____

Address _____ City _____ State & Zip _____ Fax _____

Account #'s: Checking _____ Savings _____ Loan _____

TRADE INFORMATION

1) Name _____ Account # _____ Contact _____

Address _____ City _____ State & Zip _____

Phone _____ Phone _____ Fax _____

2) Name _____ Account # _____ Contact _____

Address _____ City _____ State & Zip _____

Phone _____ Phone _____ Fax _____

3) Name _____ Account # _____ Contact _____

Address _____ City _____ State & Zip _____

Phone _____ Phone _____ Fax _____

The undersigned authorizes release of all credit information requested by Boston Amplifier, Inc.

Signature _____

Date _____

Print Name: _____

Credit Required

Maximum Credit Limit:

Anticipated Monthly Purchases:	\$	Monthly:	
		Yearly:	
New Credit Limit:	Yes	No	Amount \$:
Is The Order Currently Pending:	Yes	No	Amount \$:
Will Your Purchase Be Tax-Exempt	Yes	No	Sales Tax ID No:
<p>If your purchases are tax exempt, please complete and return or fax enclosed re-sale permit tax-exempt certificate for our record. Required in All States.</p>			

I (we) agree that:

- The information provided is for the purposes of obtaining credit and is warranted to be true.
- A representative of Boston Amplifier, Inc is authorized to investigate the references listed as they pertain to my (our) credit and financial responsibility.
- The terms of sale are **net cash thirty (30) days** from the date of the each invoice. All payments received after 30 days shall be subjected to a finance charge at the **rate of 1.5% per month** or any lesser charge reflecting the maximum amount legally permissible.
- Any checks **return insufficient** from bank is subject to an additional charge of **\$75.00 per check**.
- The undersigned agrees and understands that should collection of his/her account require litigation, the Boston Amplifier may elect judicial proceedings and you will pay reasonable court costs and attorney fees as permitted by law.

Authorized Signature: _____

Print Name: _____

Title: _____

Date: _____



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OUR TERMS:

All orders originated within the United States of America are Net 30 days from invoice date on approved credit.

Any orders originated out side of the United States of America are cash in advance, Letter of Credit or Money Transfer. A Performa invoice will be faxed or emailed prior funds transferred.

Prior approval of these terms by the accounting department of Boston Amplifier, Inc is necessary.

RMA (Return Merchandise Authorization) number is necessary to obtain from Boston Amplifier Customer service prior shipping any return merchandise. Any merchandise that has been opened or not opened will be subject to restocking charge.

I authorize Boston Amplifier, Inc to contact references and to obtain information from outside sources that may be needed to obtain credit.

The application has been carefully prepared by the undersigned and is to my knowledge complete, accurate and truthful.

IF MY ACCOUNT IS ACCEPETED, I AGREE TO PAY ACCORDING TO BOSTON AMPLIFIER TERMS OF SALE. I FURTHER AGREE TO PAY ALL COLLECTION COST AND EXPENSES, INCLUDING REASONABLE ATTORNEY'S FEE INCURED BY BOSTON AMPLIFIER IN COLLECTION OR ATTEMPTING TO COLLECT SUCH ACCOUNT.

Authorized Signature: _____

Print Name: _____

Title: _____

Date: _____



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SALES TAX RULES AND REGULATIONS RESALE CERTIFICATE

To Our Customers:

In compliance with Sales and Use Tax Laws, it is necessary that we have from all our customers a signed re-sale certificate, with their State Sales Tax Permit Number, to show that the merchandise has been purchased for re-sale.

The good faith of the seller will be questioned if he/she has knowledge of facts which gives rise to a reasonable inference that the purchaser does not intend to resell the property as, for example, knowledge that a purchaser of particular merchandise is not engaged in the business of selling that kind of merchandise.

Under "Description of property to be purchased" there may appear:

- (1) Either an itemized list of the particular property to be purchased for resale, or
- (2) A general description of the kind of property to be purchased for resale. Such certificate is good until revoked in writing.

Please insert your new SALES TAX PERMIT NUMBER, WITH YOUR SIGNATURE AND ADDRESS ON THE ATTACHED RE_SALE CERTIFICATE AND RETURN IT TO USE AT ONCE.

Please Complete The Resale Certificate

I HEREBY CERTIFY: That I hold valid seller's permit No _____ issued pursuant to the Sales and Use Tax Law; That I am engaged in the business of selling _____ that the tangible personal property described herein which I shall purchase from: **BOSTON AMPLIFIER, INC** will be resold by me in the form of tangible personal property; provided, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property or other authorized amount.

Description of property to be purchased: _____

Date: _____ 200__

Signature of Purchaser or Authorized Agent): _____

Title: _____ At: _____

Address: _____