



CUSTOM VINYL PRODUCTS

AUTHORIZATION TO RELEASE CREDIT INFORMATION

Dear Prospective New Customer,

Thank you for your interest in establishing credit with our company. Please sign the authorization below to release credit information and complete the enclosed form. Then submit it to us with a current list of references. We will review this information and contact these references in order to make our decision.

Warmest Regards.

Jennifer Mathis
Jennifer Mathis
Credit Department

I, _____ recently applied for credit with Custom Vinyl Products, LLC in Newport News, Virginia. I have been requested to provide information regarding my credit history. Therefore, I authorize an investigation of my credit worthiness. Your release of my credit information is authorized, whether such information is of record or not. I release you and all persons, agents, agencies, employees, firms, companies or parties affiliated with you from any damages resulting from providing this information.

This authorization is valid for ninety (90) days from the date of my signature below. Please keep a copy of my release request for your files.

Thank you in advance for your co-operation.

Authorized Signer / Title

Date

Print Name and Title



CUSTOM VINYL PRODUCTS

241 Enterprise Drive, Suite B
Newport News VA 23603
757-887-3194 / Fax 757-887-5472

CREDIT APPLICATION

The undersigned hereby applies for credit with Custom Vinyl Product, LLC upon the terms and conditions hereinafter set forth. In the event that credit is extended the undersigned agrees to be bound by such terms and conditions.

Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

SSN/TIN: _____ Contact: _____

Telephone: _____ Fax: _____

Type of Entity: Sole Proprietorship () Partnership () Corporation () LLC ()

Audited Financials Available: Yes () No ()

If partnership, corporation or limited liability company, state the date and place of organization or incorporation: _____

List names of stockholders or members:

_____	_____
_____	_____
_____	_____
_____	_____

Contractor ID# _____ Duns Number: _____

BANK REFERENCES

Bank Name: _____ Phone: _____

Contact Person: _____ Account # : _____

Address: _____ City _____ State _____ Zip _____

Available Line of Credit: \$ _____

Bank Name: _____ Phone: _____

Contact Person: _____ Account # : _____

Address: _____ City _____ State _____ Zip _____

Available Line of Credit: \$ _____

TRADE REFERENCES

Company Name: _____ Contact: _____

Phone: _____ Fax: _____

Address: _____ City _____ State _____ Zip _____

Account Number: _____ Annual Purchase Volume: _____

Company Name: _____ Contact: _____

Phone: _____ Fax: _____

Address: _____ City _____ State _____ Zip _____

Account Number: _____ Annual Purchase Volume: _____

Company Name: _____ Contact: _____

Phone: _____ Fax: _____

Address: _____ City _____ State _____ Zip _____

Account Number: _____ Annual Purchase Volume: _____



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TERMS AND CONDITIONS

(1% 10, Net25)

In the event that credit is extended to the applicant hereunder, the applicant agrees to pay the balances due on or before the date due. In the event that payment of the balance is received by Custom Vinyl Products, LLC on or before the tenth day from the invoice date, the applicant shall be entitled to a discount of one (1%) percent for early payment. Any balances not received on or within the net 25-day period from the date of the invoice shall bear interest at the rate of two and one-half percent (2.5%) monthly until paid in full.

Custom Vinyl Products may discontinue further extensions of credit to applicant at any time in its sole discretion for any reason. In the event that the applicant should fail to pay any sum due Custom Vinyl Products, LLC hereunder, Custom Vinyl Products, LLC shall be entitled to recover from the applicant all cost of collection, including without limitation reasonable attorney fees.

I, _____, on behalf of _____
(company), acknowledge and understand the terms and conditions and agree to them in full.

Authorized Signature

Title

Date: _____

Authorized Signature

Title

Date: _____