



CREDIT APPLICATION

**Professional
Computer Support**

LEGAL COMPANY NAME:

TYPE OF BUSINESS:

FEDERAL ID #

PURCHASING AGENT:

TELEPHONE NUMBER:

BUSINESS ADDRESS:

CITY:

STATE:

ZIP:

TELEPHONE NUMBER:

FAX NUMBER:

MAILING ADDRESS:

CITY:

STATE:

ZIP:

NAMES OF OFFICERS OR OWNERS OF FIRM AND TITLE

1. NAME:

1. TELEPHONE #:

2. NAME:

2. TELEPHONE #:

3. NAME:

3. TELEPHONE #:

COMPANY CONTROLLER:

TELEPHONE #:

ACCOUNTS PAYABLE CONTACT:

TELEPHONE #:

NAMES OF AUTHORIZED BUYERS ON THIS ACCOUNT

1. NAME:

1. TELEPHONE #:

2. NAME:

2. TELEPHONE #:

3. NAME:

3. TELEPHONE #:

NAME OF BANK:

BANK ADDRESS:

ACCOUNT#:

TELEPHONE#:

CONTACT:

CHECKING

SAVINGS

CREDIT LIMIT REQUESTED: \$

LOCAL TRADE REFERENCES:

NAME	ADDRESS	CITY	STATE	ZIP	TELEPHONE #	CONTACT
1.						
2.						
3.						

TAX EXEMPT: NO YES IF YES, PLEASE PROVIDE A COPY OF CERTIFICATE OF REGISTRATION

The information above is given to obtain an open account with The RetroTechs. The RetroTechs is authorized to make any credit inquiries necessary for approval according to the Federal Fair Credit Reporting Act. U.S. Law 91-508(15 USC 1681). I certify that the above is correct and that I have authority to incur liabilities in the name of the company

DATE:
BY:

COMPANY NAME:
TITLE:

NOTICE:

If account is authorized to purchase services and/or any computer equipment and items pertaining to the equipment, be it understood that all consultant services be due on terms of net 30 days from date of invoice and all computer equipment and items pertaining to the equipment be due on C.O.D. terms. Late fees in the amount of 1.5% of the invoice will be assessed after the due date and will accrue monthly on all delinquent accounts. Applicant will be responsible for attorney's fees, court costs, and post-judgement interest if default litigation occurs. This agreement shall be enforced in accordance with the laws of the state of Georgia.

SIGNED BY: _____



Apple Specialist

