



NIULINE DISTRIBUTION, INC.  
2255 W DESERT COVE AVE, STE A, PHOENIX, AZ 85029  
T: (602)861-2828 F: (602)216-8282 NIULINE.COM

## CREDIT APPLICATION FORM

### CORPORATION INFORMATION

CORPORATE NAME: \_\_\_\_\_ (DBA) IF APPLICABLE: \_\_\_\_\_

BUSINESS TYPE:  DISTRIBUTOR  DEALER  DESIGNER  OTHER (EXPLAIN) \_\_\_\_\_

TYPE OF OWNERSHIP\*:  CORPORATION  PROPRIETORSHIP  PARTNERSHIP  L.L.C  SOLE OWNER

FED ID#: \_\_\_\_\_ OWNER NAME(S): \_\_\_\_\_

DIRECT LINE/CELL#: \_\_\_\_\_ FAX#: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

*\*NOTE: IF IN BUSINESS LESS THAN 5 YEARS, YOU MUST COMPLETE THE PERSONAL GUARANTEE SECTION*

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SHIPPING ADDRESS (IF DIFFERENT): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### ACCOUNTING DEPARTMENT INFORMATION

ACCOUNTING CONTACT: \_\_\_\_\_ POSITION/TITLE: \_\_\_\_\_

DIRECT LINE/CELL#: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

### BANKING DETAILS/INFORMATION

BANK NAME: \_\_\_\_\_

BRANCH ADDRESS: \_\_\_\_\_

ACCOUNT#: \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

### TRADE REFERENCES

REFERENCE 1 NAME: \_\_\_\_\_ ACCOUNT#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

REFERENCE 2 NAME: \_\_\_\_\_ ACCOUNT#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

REFERENCE 3 NAME: \_\_\_\_\_ ACCOUNT#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

**PERSONAL GUARANTEE (IF IN BUSINESS LESS THAN 5 YEARS):**

THE UNDERSIGNED, FOR CONSIDERATION DO HEREBY INDIVIDUALLY AND PERSONALLY GUARANTEE THE FULL AND PROMPT PAYMENT OF ALL INDEBTEDNESS HERETOFORE OR HEREAFTER INCURRED BY THE ABOVE BUSINESS. THIS GUARANTEE SHALL NOT BE AFFECTED BY THE AMOUNT OF CREDIT EXTENDED OR ANY CHANGE IN THE FORM OF SAID INDEBTEDNESS. NOTICE OF THE ACCEPTANCE OF THIS GUARANTEE, EXTENSION OF CREDIT, MODIFICATION IN TERMS OF PAYMENT, AND ANY RIGHT OR DEMAND TO PROCEED AGAINST THE PRINCIPAL DEBTOR IS HEREBY WAIVED. THIS GUARANTEE MAY ONLY BE REVOKED BY WRITTEN NOTICE WHICH SHALL BE SENT TO THE CREDITOR'S CREDIT OFFICE BY CERTIFIED MAIL. ANY REVOCATION DOES NOT REVOKE THE OBLIGATION OF THE GUARANTORS TO PROVIDE PAYMENT FOR INDEBTEDNESS INCURRED PRIOR TO THE REVOCATION. I AUTHORIZE THE SELLER AND THEIR ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT AND TO CONTACT MY REFERENCES AS NECESSARY. AS GUARANTOR, I AM ALSO BOUND BY THE ABOVE ARBITRATION CLAUSE.

GUARANTOR'S NAME (PRINTED): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TAX I.D. OR SOCIAL SECURITY NUMBER (REQUIRED): \_\_\_\_\_

**TERMS AND CONDITIONS:**

REQUESTED TERMS OF PAYMENT (O.A.C. FROM NIULINE): \_\_\_\_\_

FAILURE TO PAY ON THE DUE DATE OF EACH INVOICE SHALL DEEM THE DEBT TO BE DELINQUENT. A FINANCE CHARGE AT THE RATE OF 1.5% PER MONTH WILL BE CHARGED ON OVERDUE BALANCES.

ALL CLAIMS MUST BE MADE IN A TIMELY MANNER. NO GOODS ARE TO BE RETURNED WITHOUT PRIOR AUTHORIZATION AND MAY BE SUBJECT TO A 15% RESTOCKING FEE.

ALL PRICES ARE SUBJECT TO CHANGE WITHOUT PRIOR NOTICE. PRICE CHANGES ARE EFFECTIVE ON A SPECIFIC DATE. ALL ORDERS RECEIVED AFTER THAT DATE WILL BE BILLED AT THE REVISED PRICE UNLESS A CUSTOM QUOTE HAS BEEN GENERATED.

ALL CREDIT SHALL BE EXTENDED AT NIULINE'S SOLE DISCRETION. NIULINE MAY INCREASE, DECREASE, OR TERMINATE CREDIT AVAILABILITY AT ANY TIME WITH OR WITHOUT CAUSE AT ITS SOLE DISCRETION.

THERE IS A \$35.00 CHARGE FOR EACH RETURNED CHECK, PLUS ANY ADDITIONAL CHARGES THAT MAY OCCUR.

THE CUSTOMER AGREES TO PAY FOR ANY EXPENSE NIULINE INCORPORATED INCURS IN COLLECTING UNPAID DEBT, INCLUDING LAWYER'S FEES, COLLECTION AGENT FEES, AND COURT COSTS.

IF THE CUSTOMER IS A PROPRIETORSHIP OR PARTNERSHIP, THEN EACH OWNER OR PARTNER AGREES TO BE PERSONALLY LIABLE FOR ALL DEBTS RESULTING FROM THE SALE OF MERCHANDISE TO THEM BY NIULINE INCORPORATED

BY SIGNING BELOW, THE CUSTOMER AUTHORIZES NIULINE INCORPORATED TO PERIODICALLY OBTAIN CREDIT REPORTS FOR THE PURPOSE OF ESTABLISHING, INVESTIGATING, OR MAINTAINING A CREDIT RELATIONSHIP WITH THEM.

NAME (PRINTED): \_\_\_\_\_ POSITION/TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_