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Date: \_\_\_\_\_

Sales Rep: \_\_\_\_\_

Amount of credit requested per month: \_\_\_\_\_

# CREDIT APPLICATION

Firm Name: \_\_\_\_\_ Contact \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone#: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail Address \_\_\_\_\_ Website \_\_\_\_\_

Type of Business: \_\_\_\_\_ Owned since: \_\_\_\_\_

**Ownership:** Sole Ownership: \_\_\_\_\_ Partnership: \_\_\_\_\_ Corporation: \_\_\_\_\_

Name \_\_\_\_\_ Title: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Name \_\_\_\_\_ Title: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Name \_\_\_\_\_ Title: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Is this for resale: \_\_\_\_\_ (If yes) Resale # \_\_\_\_\_ (Please send completed Resale Card)

### Trade References:

1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Bank: \_\_\_\_\_ Acct. #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Bank: \_\_\_\_\_ Acct. #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with our terms. Past due invoices are subject to interest penalty of 1 1/2% per month, but no more than maximum amount allowed by law. Applicant agrees to pay interest plus reasonable collection cost and or attorney fees in case of default. In the event of a suit Orange County courts covering Dual Graphics Inc., Brea CA will have exclusive jurisdiction. The applicant further acknowledges careful reading, understanding and agreement to Terms and Conditions of sale. The applicant hereby authorizes and instructs any person or consumer reporting agency to compile and furnish any information concerning the applicant and or the company.

Signed by authorized agent of corporation, general partner of partnership or owner of sole proprietorship.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_