



CREDIT APPLICATION

Date _____

Applicant Company Name _____

Address _____

City, State & Zip _____

Telephone No. () _____ Ext: _____ Fax No. () _____

Principal/Owner _____

Contact Person _____ Title _____

Email _____

Anticipated Credit Needed: \$ _____ Annual Sales Volume \$ _____

Form of Organization:

Individual/Sole Proprietary Corporation Partnership Other _____

Social Security/Employer ID# _____ California Resale# _____

(Please attach copy of Resale Tax Certificate)

Type of Business _____

How long in business? _____ No. of Employees _____

Invoicing Instructions:

Address _____

City, State & Zip _____

Person or Department invoices should be directed to: _____

Person to Contact regarding Accounts Payable: _____

Purchase Order Number Required: YES _____ NO _____



TRADE REFERENCES
(Please provide FAX Numbers)

1) Vendor Reference _____	Phone No. () _____
Address _____	Fax No. () _____
Contact Person _____	No. of Years Associated _____
2) Vendor Reference _____	Phone No. () _____
Address _____	Fax No. () _____
Contact Person _____	No. of Years Associated _____
3) Vendor Reference _____	Phone No. () _____
Address _____	Fax No. () _____
Contact Person _____	No. of Years Associated _____
4) Vendor Reference _____	Phone No. () _____
Address _____	Fax No. () _____
Contact Person _____	No. of Years Associated _____

BANK REFERENCE

1. Name and address of bank

Tel () _____ Fax () _____

2. Information to be verified:

Type of account	Account in name of	Account number	Balance
a. _____	_____	_____	_____
b. _____	_____	_____	_____

3. Name and Address of Applicant _____

4. Signature of Applicant _____

(Authorized Account Signer) _____ / ____ / ____
 Date

TO BANK: I have applied for credit with SF VIDEO. You are authorized to verify this information and to supply SF VIDEO with the information requested. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers.



TERMS AND CONDITIONS OF SALE

The undersigned agrees to pay for all purchases according to the terms of Creditor. No terms or conditions or purchase orders different from the Terms of Creditor will become part of any sales agreement, purchase order, or other document unless specifically approved in writing by Creditor. Conditions for freight shall be F.O.B. Creditor's specifications, unless otherwise noted in writing. (Payments may be applied against open balance in the discretion of Creditor.) The laws of the State of California shall be made applicable to all suits arising under any agreement between the undersigned and Creditor. All accounts shall be due and payable in San Francisco, California. In the event of litigation, sole jurisdiction and venue shall be in San Francisco County, California. Applicant waives any and all objections to jurisdiction or venue in San Francisco County courts. **THE PERSON SIGNING THIS APPLICATION WARRANTS THAT HE/SHE IS AUTHORIZED TO SIGN THIS APPLICATION AND CERTIFIES THAT ALL OF THE INFORMATION CONTAINED IN THE APPLICATION AND ANY ATTACHEMENTS ARE TRUE AND CORRECT TO THE BEST OF HIS/HER INFORMATION, KNOWLEDGE AND BELIEF.**

SIGNATURE OF OWNER OR OFFICER OF CORPORATION IS REQUIRED TO PROCESS APPLICATION.

The undersigned agrees to the above terms and conditions, and authorizes the above banks and companies to release the information requested.

Company Name: _____

By: _____
Signature and Title

Printed Name

Date: _____

PERSONAL GUARANTY

In consideration of credit being extended to the above named firm, I personally agree all indebtedness hereunder. I further agree that this guaranty is an absolute, completed, and continuing one and shall be subject to an in consideration of the above:

Company Name: _____

By: _____
Signature and Title

Printed Name

Date: _____

PLEASE RETURN BY FAX TO OUR ACCOUNTING DEPARTMENT AT 415-288-9410.