			RECIS		ts	<b>CREDIT APPLICATION</b>
Retu to	New	Image: Second state27040 San Bernardino AverativeNew A\C A\C UpdatesRedlands, CA 92374			nue Fax # : (909) 379-0169 Tel # : (866) 629-6636	
t Your Business						
About	City, State, Zip: Type of Business:					
Ownership Details	Sole Proprietor\ Partnership Corporation	President:  VP \ Treasurer  Secretary    (Sole Proprietor\ Active Partner\ Limited Partner)  (Sole Proprietor\ Active Partner\ Limited Partner)    Name:				
Bank Information Release	Bank Name :				Authorization to Bank	Account Numbers    Checking:

	Please list 3 or more credit references in which you currently do business with on an <u>open account</u> basis. Major Suppliers Preferred. Complete Address & Fax #s Required				
Trade References	Major Suppliers Preferred. Comp      Supplier Name:	Supplier Name:			
Resale Certificate	If taxable check box only.  Original Card of 'Resale Certificate' is requi    Business Name:	red  If non-taxable, Taxable Non-Taxable    I hereby certify that I hold a valid Seller's Permit.    Seller's Permit #    Owner\ Officer's    Signature:    Title:    Date :			
Credit Request Details and Conditions	Your Credit Information    Credit Limit Requested: \$  Is an order pending?    1) Have you filed for bankruptcy?  No  Yes  If 'yes' provide details:    2) Will applicant submit 'financial statements', if needed, to determine credit terms and limits?  No  Yes    Our Sale & Credit Terms    Invoices are due as payment terms stipulate. Any request for credit or corrections on an invoice cannot be used as a reason for non-payment. If any unpaid invoices exceed terms, the account can be put on C.O.D. and orders held. If an account is on C.O.D. or not in good standing, a deposit may be required on "Special Orders". Accounts not in good standing are subject to a change in payment terms. Should legal action be used by the seller to obtain payment for goods\ materials, the seller shall be entitled to recover from the buyer all reasonable costs incurred in collection, as well as reasonable attorney's fees expended taking such action, whether or not a lawsuit is filed, together with all costs thereof.				

	Personal Guaranty								
Personal Guaranty	For good and valuable consideration, and as an inducement for Precision Screen & Security Products to extend credit to the applicant for open account, the undersigned jointly, severally, and unconditionally guaranty to Precision Screen & Security Products the prompt and full payment of all amounts owed to Precision Screen & Security Products applicant arising from any and all purchases on account. The undersigned agrees to remain bound on this guaranty, not withstanding any extension, forbearance or waiver, or release, discharge or substitution or any collateral or security for the debt. In the event of default, Precision Screen & Security Products may seek payment directly from the undersigned without need to proceed first against applicant. The obligation of the undersigned, under this guaranty, shall be liable for payment of debt on account purchases described above between								
Gu	applicant and Precision Screen & Security Products. In the event of default, the guarantor shall be responsible for all attorney's fees and								
nal	reasonable costs of collection. This guaranty shall be binding upon and inure to the benefit of the parties, their successors, assigners and personal representative.								
,TSO	This guaranty shall be bliefing upon and mule to the beliefit of the parties, then successors, assigners and personal representative.								
Pe	Date:								
	Address:								
	[Guarantor (Print)] (Guarantor's Signature)								
uo	Declaration								
	The undersigned hereby affirms that the information on this application is true and correct. The undersigned agrees to the terms of sales and								
	credit as set forth above. The applicant also agrees to hold harmless any of the previously mentioned credit references that in good faith provided Precision Screen & Security Products credit information.								
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Declaration									
	Date: Printed Name:								
	1 milea Manie.								
	Title:								
	Accounting Dept Use Only								
Accounting Department									
	Approved Amount \$ Declined								
	Approved by: Comments:								
	Title:								
	Date:								

Date Revised: 08/28/12