

Danick Systems



777 Centre St. ♦ Jamaica Plain, MA 02130
Phone (617) 524-4841 ♦ Fax (617) 983-0068 ♦ Email Dansys@DanickSystems.com

Credit Application Information

This information is submitted to Danick Systems by _____ (“Company”) for credit information. This information is confidential and will be handled by accounting personnel only. The principals of company give Danick Systems permission to confirm any information obtained herein.

Terms Requested: _____ C.O.D Company Check _____ Net 15 _____ Net 7 _____ Credit Card _____

Company Name: _____ DBA: _____
Address: _____ FTID: _____
City: _____ STID: _____
State: _____ Years in business: _____
Zip code: _____ # of Employees: _____
Phone: _____ Type of business: Sole / Partner / Corp State: _____
Fax: _____ Annual sales: _____
Ever filed for bankruptcy? YES / NO

Credit References:

Name: _____ Telephone#: _____
Address: _____ Contact: _____
Acct#: _____
Name: _____ Telephone#: _____
Address: _____ Contact: _____
Acct#: _____
Name: _____ Telephone#: _____
Address: _____ Contact: _____
Acct#: _____
Name: _____ Telephone#: _____
Address: _____ Contact: _____
Acct#: _____

Bank Information:

Checking Address: _____
Bank name: _____
Officer: _____ Phone: _____
Acct#: _____ Date opened: _____
Savings Address: _____
Bank name: _____
Officer: _____ Phone: _____
Acct#: _____ Date opened: _____

Principal Information:

Name: _____ Name: _____ Name: _____
Address: _____ Address: _____ Address: _____
City, St, Zip: _____ City, St, Zip: _____ City, St, Zip: _____
SS#: _____ SS#: _____ SS#: _____

Personal / company credit card security #: _____ Exp. _____ Type: _____
Name on Card: _____

Authorization:

I hereby certify that the above information is true; undersigned authorizes release of all credit information both business and/or personal requested by Danick Systems. It is understood that such information is to be held in the strictest confidence. I agree to pay Danick Systems interest on all invoices past due at an amount of 1.5% per month and a \$15 fine on all returned checks. In the event Danick Systems is required to file legal action against me or my company or other wise seek to enforce this agreement, I agree to cover any legal fees and other expenses incurred by Danick Systems. Any outstanding balance beyond terms given will be charged to credit card. This form may be reproduced or photocopied and a faxed copy shall be as effective as the original, which I have signed.

Authorized Signature _____ Title _____ Date _____