

**\*\*\*\* CREDIT APPLICATION FORM \*\*\*\***

**ACCOUNT NAME, ADDRESS & PHONE#:**

Store Name: \_\_\_\_\_

Corporate Name: \_\_\_\_\_

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

\_\_\_\_\_

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

e-mail: \_\_\_\_\_

Billing Address (If different): \_\_\_\_\_

\_\_\_\_\_

Bookkeeper's Phone#: \_\_\_\_\_ Fax#: \_\_\_\_\_

**CONTACTS:**

Magazine Buyer: \_\_\_\_\_ Store Manager: \_\_\_\_\_

Accounts Payable Bookkeeper: \_\_\_\_\_ Other contacts: \_\_\_\_\_

**OWNERSHIP**

TYPE OF OWNERSHIP: \_\_\_\_\_ Corporation \_\_\_\_\_ Proprietorship \_\_\_\_\_ Partnership Tax ID#: \_\_\_\_\_

Owner's Name #1: \_\_\_\_\_ Home Phone #1: \_\_\_\_\_ Soc Sec #1: \_\_\_\_\_

Home Fax #1: \_\_\_\_\_ Home e-mail #1: \_\_\_\_\_

Home Address #1: \_\_\_\_\_

Owner's Name #2: \_\_\_\_\_ Home Phone #2: \_\_\_\_\_ Soc Sec #2: \_\_\_\_\_

Home Address #2: \_\_\_\_\_

Home Fax #2: \_\_\_\_\_ Home e-mail #2: \_\_\_\_\_

**BANK REFERENCE**

Bank Name: \_\_\_\_\_ Account#: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**TRADE REFERENCES:**

Name I: \_\_\_\_\_ Account# \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Contact: \_\_\_\_\_

Fax #: \_\_\_\_\_ e-mail: \_\_\_\_\_

Name II: \_\_\_\_\_ Account# \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Contact: \_\_\_\_\_

Fax #: \_\_\_\_\_ e-mail: \_\_\_\_\_

Name III: \_\_\_\_\_ Account# \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Contact: \_\_\_\_\_

Fax #: \_\_\_\_\_ e-mail: \_\_\_\_\_

Store Hours & Days of Operation: \_\_\_\_\_

In business since: \_\_\_\_\_; Own other stores that carry magazines? \_\_\_\_\_

If new store, specify opening date: \_\_\_\_\_ and 1st date to ship: \_\_\_\_\_ Total # of titles you carry: \_\_\_\_\_

Estimated store size: \_\_\_\_\_ sq ft; Display area in sq ft for magazines: \_\_\_\_\_; Display area in linear ft: \_\_\_\_\_;

**SUPPLIERS:**

If possible, list any other distributors that supply your store and the percentage discount offered:

Distributor #1 _____ % _____	Distributor #6 _____ % _____
Distributor #2 _____ % _____	Distributor #7 _____ % _____
Distributor #3 _____ % _____	Distributor #8 _____ % _____
Distributor #4 _____ % _____	Distributor #9 _____ % _____
Distributor #5 _____ % _____	Distributor #10 _____ % _____

**TERMS OF SALE:**

The undersigned (Customer) agrees to the following terms of sale:

1. The Customer accepts responsibility for returns lost in transit.
2. The Customer agrees to pay for invoices, less credit for returns, within 60 days from invoice date, unless otherwise mutually agreed upon.
3. The Customer will reimburse Ubiquity Distributors for any bank fees Ubiquity receives for checks the Customer bounces.
4. The Customer agrees that a New York City court will be an acceptable venue for the resolution of any billing disputes.
5. The Customer agrees to pay for any expenses Ubiquity Distributors incurs in collecting unpaid debt, including lawyer's fees, collection agent fees, and court costs.
6. 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 Ubiquity Distributors.
7. By signing below, the Customer authorizes Ubiquity Distributors to periodically obtain credit reports for the purpose of establishing, investigating, or maintaining a credit relationship with them.

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

Name (print): \_\_\_\_\_ Position: \_\_\_\_\_