

Trade Printing Services, LLC

2080 Las Palmas Dr., Carlsbad, CA 92009
760-496-0230 Fax 760-496-0226

Credit Application

**=Required Information*

Name of Business*: _____ Telephone: _____
Address*: _____ FAX: _____
Billing Address*: _____
Contact Name – Acct Payable: _____
Date Established*: _____ Type of Business*: Partnership Corporation Other _____
Under laws of what State*? _____ Credit Amount Requested: \$ _____
Your account will be - Resale Taxable (If resale, please submit resale card) Resale* # _____

Name (s) of Proprietor or all Partners:

Name / Title: _____
Name / Title: _____
Name / Title: _____
Have any of the above principals ever had a business failure or filed for bankruptcy*? YES NO
If yes, Please describe business: _____

Name of Bank*: _____ Acct: _____
Address*: _____
City*: _____ State*: _____ ZIP*: _____

Individuals who may approve orders: _____
Is a Purchase Order required*? YES NO
Credit Terms Requested from TPS: _____
Preferred Delivery Method: _____

Trade References: (Please list firms that you purchase from/through with an open account)

Name	Address:	Telephone
_____	_____	_____
_____	_____	_____

Terms & Conditions

The above information is submitted for the purpose of obtaining credit. The undersigned authorizes Trade Printing Services L.L.C. (T.P.S.) to make such inquires as are necessary to obtain credit information and authorizes my/our bank and/or suppliers to release information regarding account(s). I/we understand that payment is due net 30 from invoice date. In consideration of the extension of credit, I/we agree to pay 1.5% monthly (18% APR) late charges on any amounts past due, and to pay attorney, court, and all other costs in the collection of balance. I/we agree to pay for work performed on any customer-cancelled orders. I/we accept sole responsibility of any errors that are on the Customer Approved Proof. I/we agree that orders may be subject to hold until existing outstanding balances have been paid, current, and/or under credit limit. I/we understand T.P.S. is not responsible for keeping work on file for any length of time. While T.P.S. will make every effort to maintain reprint capabilities and deliver services in a time manner, T.P.S. is not liable for any loss or damages experienced as a result of the inability to deliver services in a timely manner, faulty equipment or loss of power. I/we agree to pay for any service charges experienced for returned checks, minimum \$25.00 charge will be served. Payment must be made within 5 business days or additional charges will be applied. All contracts or agreements are subject to the Printing Trade Customs in conjunction with P.I.A. (Printing Institute Assn.) and G.A.T.F. (Graphic Artists Trade Foundation)

Authorized Signature*: _____ Title: _____ Date: _____
Signature Authorizing Credit Check and Bank Rating

Print Name*: _____

Personal Guarantee

In consideration of the extension of credit by T.P.S., the undersigner does jointly and personally guarantees to pay and be responsible for payment of all sums, balances and account dues to T.P.S. by the buyer, including attorney, court and/or collection charges. This shall be an open and continuous guarantee and shall continue in force notwithstanding any change in the form of such indebtedness, renewals or extensions granted, without obtaining written consent thereto. I agree that in the event of any default at any time by said buyer, T.P.S. shall be entitled to full payment from me without prior demand or notice.

Signature*: _____ Print Name*: _____ Date: _____

Address: _____

Social Security* #: _____ Drivers Lic.* # _____ Phone: _____

TPS Use: _____

Customer Number: _____ Date: _____ TPS Terms: _____

TPS Credit Limit: \$ _____ Bus.Type: _____ Sales Rep. _____