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# Confidential Credit Application

<b>Business Information</b>		Credit Requested: <input type="checkbox"/> \$250 <input type="checkbox"/> \$500 <input type="checkbox"/> \$1000 <input type="checkbox"/> \$1500 <input type="checkbox"/> Other _____
Company Name (Parent Name)		DBA (Doing Business As)
Date Formed:	EIN#:	Resale State/No.:
In Business Since:		Business License No.:
Legal Form: Check One <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> Sub-Chapter S Corp		
Annual Revenue:	Square Footage:	No. of Locations:

<b>Principals/Owners</b>		
Principal/Owner Name#1	Principal/Owner Title	Email:
Home Address	City/State/Zip	Home Phone:
Social Security Number	Date of Birth	Drivers License No.
Principal/Owner Name#2	Principal/Owner Title	Email:
Home Address	City/State/Zip	Home Phone:
Social Security Number	Date of Birth	Drivers License No.

<b>Addresses</b>	<b>Retail Store Address</b>	<b>Billing Address</b>
	Store Name	Company Name
	Address	Street Address
	City/State/Zip	City/State/Zip
	Phone                      Email	Phone                      Email
	Attention	Attention

<b>Trade References</b>	<b>Trade Reference No. 1</b>	<b>Trade Reference No. 2</b>
	Company Name	Company Name
	Address	Address
	City/State/Zip	City/State/Zip
	Phone                      Email	Phone                      Email
	Attention                      Fax	Attention                      Fax
	Customer No.                      Acct Open Date	Customer No.                      Acct Open Date
	High Credit                      Acct Balance	High Credit                      Acct Balance
	<b>Trade Reference No. 3</b>	<b>Trade Reference No. 4</b>
	Company Name	Company Name
	Address	Address
	City/State/Zip	City/State/Zip
	Phone                      Email	Phone                      Email
	Attention                      Fax	Attention                      Fax
	Customer No.                      Acct Open Date	Customer No.                      Acct Open Date
	High Credit                      Acct Balance	High Credit                      Acct Balance

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Company Name

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Confidential Credit Application—cont.

Bank References

Bank Reference No. 1		Bank Reference No. 2	
Institution Name		Institution Name	
Address		Address	
City/State/Zip		City/State/Zip	
Phone	Email	Phone	Email
Contact	Fax	Contact	Fax
Checking Acct No.		Savings Acct No.	
Bank Reference No. 3 (if applicable)		Bank Reference No. 4 (if applicable)	
Institution Name		Institution Name	
Address		Address	
City/State/Zip		City/State/Zip	
Phone	Email	Phone	Email
Contact	Fax	Contact	Fax
Acct No.		Acct No.	

Terms and Conditions

All accounts are prepaid with credit card or company check until your credit application has been completed, reviewed and approved. If any indebtedness incurred pursuant to this request for credit is not paid in full when due, the undersigned agrees to pay all costs of collection, including reasonable attorney fees. Any balance so remaining unpaid shall bear interest at the lesser of 1.5% per month or the maximum rate permitted by applicable law, until paid in full.

Personal Guaranty Agreement

For and in consideration of the extension of credit to \_\_\_\_\_, herein called "Debtor", the undersigned hereby personally guarantees payment of all obligations to Now That's Impressive, LLC incurred by "Debtor" upon demand, including court costs, collection agency commissions, and reasonable attorney fees.

Printed Name

Signature

Statement of Accuracy and Permission to Verify

I hereby certify that the information contained herein is complete and accurate. The information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions, trade references, and credit agencies to release necessary information and for NTI to make any and all inquiries necessary to process the credit application being applied for in order to verify the information contained herein.

Signature

Date

Fax completed form along with copies of business license, resale form, and articles of incorporation to 859.781.7484. We look forward to partnering with you!