



CREDIT APPLICATION

FAX YOUR COMPLETED APPLICATION TO 717-964-3710, ATTN: BARB LENTZ

Please complete all applicable information. If additional space is required attach another sheet.

Business Contact Information

Last:	First:	M/I:	Title
Legal Name of Business:			Tax I.D. Number
Fictitious/Other Business Names:			DUNS Number
Address:			
City:	State:	ZIP:	Phone:
Fax:	Email:		

Business Information

Type of Business:	In Business Since:
Legal Form Under Which Business Operates:	
Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Other <input type="checkbox"/>	
If Division/Subsidiary, Name of Parent Company:	In Business Since:
Name of Company Principal Responsible for Business Transactions:	Title:
Address:	City: State: ZIP: Phone:
<i>If DAS determines to provide credit, credit will be extended based on open terms.</i>	
Desired Credit Limit: \$ _____	

Bank References

Institution Name:	Institution Name:	
Account Numbers:	Existing Loan:	Loan Balance:
Address:	Address:	
Phone and Fax:	Phone and Fax:	



CREDIT APPLICATION

Trade References

Company Name:	Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:	Address:
Phone:	Phone:	Phone:	Phone:
Fax:	Fax:	Fax:	Fax:
Account Opened Since:	Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:	Current Balance:

Are Financial Statements Available? Yes No Are they audited? Yes No DAS reserves the right to request financial statements at any time both in the initial examination of the credit application and at any time that DAS determines, in its sole discretion, it requires financial statements.

I hereby certify that the information contained herein is complete and accurate and that the individual signing this application is authorized to do so on behalf of the applicant. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of credit to be extended. Furthermore, I hereby authorize the financial institutions and vendor references listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. Further, by signing this application I agree to the DAS terms and conditions for credit as set forth below.

Signature of Authorized Signer *Print Name/Title* *Date*

- Terms and Conditions:**
- All invoices are required to be paid within the terms set out in your agreement(s) with DAS or as notified by DAS and as agreed from time to time with DAS. In the absence of agreed terms or a notification by DAS, all invoices are net 20 days. In the event you reasonably dispute an invoice or a portion of an invoice, you will pay all other invoices or the undisputed portion of a single invoice in a timely manner.
 - If you fail to pay an invoice when due, then you agree to pay DAS a finance charge of 1.5% per month, 18% per year or the amount permitted under applicable law, whichever is less. You will be charged a fee of \$30.00 for any dishonored or returned check.
 - You agree that in event of a default in payment, you shall pay all applicable collection costs and all reasonable attorney fees incurred by DAS in collecting the debt. You authorize release of the credit information and your company information to any attorney or organization that is assisting DAS in the collection of any amounts due to DAS.
 - DAS reserves the right to restrict, deny or withdraw credit at any time based on its reasonable assessment of credit risk. Without limiting the foregoing, DAS may immediately suspend credit due to delinquency in payment or due to insolvency, bankruptcy, change in ownership of your organization or other event that may affect applicant's ability to pay all amounts when due.
 - You are required to inform DAS of any changed circumstances that would alter its decision to extend credit.
 - By setting up this account you certify that you are a registered reseller in each state and country where you are conducting business. You agree to provide a valid sales & use tax certificate (or country equivalent) and that any sales, use, VAT or GST owed will be paid and/or deposited by you.
 - You acknowledge receipt of and to agree to abide by DAS's returns policy which may be modified from time to time at the sole discretion of DAS.
 - You acknowledge and agree that this Credit Application and the information contained may be shared among all of the DAS Companies, Inc. affiliated companies.