



CREDIT APPLICATION

8830 Rehco Road Ste G - San Diego, CA 92121 www.topart.net  
858-554-0102 Fax: 858-554-0309 Email: \_W1@topart.net

Please type or print clearly  
All information is REQUIRED to begin the application process. Thank you!

Date: \_\_\_\_\_  
Preparer's Name & Title: \_\_\_\_\_  
Line of Credit Requested: \$ \_\_\_\_\_

**Company Information**

Legal Business Name: \_\_\_\_\_  
Doing Business As (dba): \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_  
For Past: \_\_\_\_\_ Years Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Shipping Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_  
Website: \_\_\_\_\_ Email: \_\_\_\_\_

Federal Tax ID No. (EIN or SSN): \_\_\_\_\_  
State Buisness or Resale License No.: \_\_\_\_\_  
Former Business Address (If less than 5 years): \_\_\_\_\_  
Type of Business: \_\_\_\_\_

Date Established \_\_\_\_\_ Sales Area: \_\_\_\_\_  
No. of Employees: \_\_\_\_\_ Est. Annual Sales \$ \_\_\_\_\_  
Mortgage Holder/Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

Has the firm or any of its Principals ever been bankrupt?  Yes  No  
If Yes, Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Principals**

Principal

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

Title: \_\_\_\_\_ SSN: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4 \_\_\_\_\_

Principal

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

Title: \_\_\_\_\_ SSN: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4 \_\_\_\_\_

Principal

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

Title: \_\_\_\_\_ SSN: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4 \_\_\_\_\_

Principal

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

Title: \_\_\_\_\_ SSN: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4 \_\_\_\_\_

**Trade Refereces**

1. Company Name: \_\_\_\_\_ Fax: \_\_\_\_\_  
Phone: \_\_\_\_\_ Account # \_\_\_\_\_ Contact Name: \_\_\_\_\_

2. Company Name: \_\_\_\_\_ Fax: \_\_\_\_\_  
Phone: \_\_\_\_\_ Account # \_\_\_\_\_ Contact Name: \_\_\_\_\_

3. Company Name: \_\_\_\_\_ Fax: \_\_\_\_\_  
Phone: \_\_\_\_\_ Account # \_\_\_\_\_ Contact Name: \_\_\_\_\_

4. Company Name: \_\_\_\_\_ Fax: \_\_\_\_\_  
Phone: \_\_\_\_\_ Account # \_\_\_\_\_ Contact Name: \_\_\_\_\_

**Bank References**

Type of Account: \_\_\_\_\_  
Bank Name: \_\_\_\_\_ Account No.: \_\_\_\_\_ Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Balance: \_\_\_\_\_  
Address: \_\_\_\_\_

Type of Account: \_\_\_\_\_  
Bank Name: \_\_\_\_\_ Account No.: \_\_\_\_\_ Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Balance: \_\_\_\_\_  
Address: \_\_\_\_\_

Type of Account: \_\_\_\_\_  
Bank Name: \_\_\_\_\_ Account No.: \_\_\_\_\_ Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Balance: \_\_\_\_\_  
Address: \_\_\_\_\_

**Other Business Debt** (Equipment, Leases, Maintenance, etc.)

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Balance: \_\_\_\_\_

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Balance: \_\_\_\_\_

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Balance: \_\_\_\_\_

**Type of Credit Agreement**

Customer agrees to Credit Terms: payment on receipt, but no longer than 30 days. Outstanding balances are subject to 1.5% per month interest.

Applicant agrees to pay any collection costs incurred to collect the account balance, including court costs, collection fees and attorney's fees of not less than 33% of the unpaid principal and interest. As an inducement to grant credit, the undersigned agrees to the need for verification of all information on this application and authorizes, and releases all banks, businesses and persons identified on this application to furnish any and all information requested by: **Top Art, LLC** company or its representative, by telephone or written correspondence whichever company requests. The undersigned warrants that the information is true and correct and authorizes the release of such information by signature here.

\_\_\_\_\_  
Name Title Signature Date

\_\_\_\_\_  
Name Title Signature Date

\_\_\_\_\_  
Name Title Signature Date

\_\_\_\_\_  
Name Title Signature Date

In consideration of credit being extended by **Top Art, LLC** to the above mentioned applicant, the undersigned guarantor(s) each contract and guarantee to the faithful payment, when due, of all accounts of the applicant for the next 5 years from the date of the application. The undersigned guarantor(s) each expressly waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment or demand for payment and any notice of default by applicant and all other notices guarantor(s) might otherwise be entitled to. Revocation of guarantee shall be in writing and delivered by certified mail to: **Top Art, LLC - Credit Department - 8830 Rehco Road Suite G - San Diego, CA 92121.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_