



Credit Application

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North Hollywood, CA 91605
(818) 764-8574
Fax: (818) 764-2958
modernstudio.com

Company _____

Address _____

Phone _____ Fax _____

Corporation LLC Partnership Sole Proprietor No. of employees _____

Type of Business _____ Year Established _____

Ownership (Name, Title, Home Address & Phone Numbers of Principal Officers)

1. Name _____ Title _____ Phone _____

Address _____

2. Name _____ Title _____ Phone _____

Address _____

Persons Authorized to Purchase/Rent _____

Accounts Payable Contact _____ Phone _____

PO's Required/Instructions?: _____

Resale # _____ Federal ID# _____

Name of Bank _____ Contact _____ Phone _____

Address _____

Account # _____ Checking Savings

Trade References (We require 3 local references. No Credit Cards, C.O.D. Accounts or Finance Agencies)

1. Name _____ Title _____ Phone _____

Address _____ Fax _____

2. Name _____ Title _____ Phone _____

Address _____ Fax _____

3. Name _____ Title _____ Phone _____

Address _____ Fax _____

Commercial Insurance Agency _____ Agent's Name _____

Phone _____ Fax _____ Policy # _____

Customer warrants that the representations made are true and correct and that they are made for the purpose of introducing the extension of credit to the undersigned. Customer agrees to pay invoices in accordance with their terms and agrees to pay a surcharge on all invoices 10 days past due, in the amount of 1.5% per month on the unpaid balance. It is understood that customer agrees to pay all reasonable attorney's fees in the event legal action is needed to secure payment of proper charges to client's account. Application must be signed by a corporation officer, partner or sole proprietor.

Name _____ Title _____

Signature _____ Date _____