

Vision Imaging Supplies, Inc.

7920 Deering Ave., Canoga Park, CA 91304, USA

818-710-7200, 818-710-7999

sales@vis-llc.com

CREDIT APPLICATION

Business Information

Legal Business Name: _____

Contact Person/Title: _____

Address: _____

City/State/Zip: _____

Years at this address: _____

Social Security #: _____

Phone: _____ Fax: _____

Federal ID#: _____

Email: _____

DUNS#: _____

Resale #: _____

Business Type: Sole Proprietorship _____

Ownership: ___ Public Co. ___ Private Co. ___ Non-Profit

Partnership _____

Requested Credit Line _____

Corporation _____

Years in Business: _____

State of Incorporation/Registration of Partner _____

Date of Incorporation/Registrations of Partnership _____

Bankruptcy: ___ Yes ___ No

Individual Name (Proprietorship): _____ Telephone: _____

Partner's Names (Partnership): _____ Telephone: _____

_____ Telephone: _____

Principal's Names (Corporation): _____ Telephone: _____

_____ Telephone: _____

Bank Reference

Bank: _____

Contact: _____

Address: _____

Telephone: _____ Fax: _____

City/State/Zip: _____

Account(s) #: _____

Trade References

Business Name: _____
 Address: _____
 City/State/Zip: _____

Contact: _____
 Telephone: _____ Fax: _____
 Account #: _____

Business Name: _____
 Address: _____
 City/State/Zip: _____

Contact: _____
 Telephone: _____ Fax: _____
 Account #: _____

Business Name: _____
 Address: _____
 City/State/Zip: _____

Contact: _____
 Telephone: _____ Fax: _____
 Account #: _____

Business Name: _____
 Address: _____
 City/State/Zip: _____

Contact: _____
 Telephone: _____ Fax: _____
 Account #: _____

Credit Authorization

I, the undersigned, do hereby certify that the information provided on this credit application is true and accurate. I further authorize Vision Imaging Supplies, Inc. to conduct any investigation it may deem necessary to verify the accuracy of such information. I also authorize the release of information regarding the bank references listed above.

Terms and Conditions of this Credit Application

1. Until credit approval can be obtained, new accounts will be shipped Wire Transfer, Credit Card, COD, Cash, or Certified Check.
2. All past due amounts due and owing Vision Imaging Supplies, Inc. by Applicant shall bear interest from date due until paid at the greatest applicable non-usury interest rate permitted by law. If no usury stature shall apply, all past due amounts may bear interest at 2.5% per month.
3. Orders with outstanding and past due balances will be processed on COD basis only.
4. All principals and officers of the corporation are personal guarantors to the account of the corporation.
5. Debtor agrees to pay all invoices at 7920 Deering Ave., Canoga Park, CA 91304.
6. Checks returned to insufficient funds will be assessed a \$25 service charge.

Personal Guarantee

I, the guarantor, also hereby waive any claim, right or remedy which such guarantor may now have or hereafter acquire against Vision Imaging Supplies that arises hereunder and / or from the performance by any guarantor hereunder including, without limitation, any claim, remedy or right of subrogation, reimbursement, exoneration, contribution, indemnification or participation in any claim, right or remedy against Vision Imaging Supplies, Inc., or any security in possession now or hereafter acquired, whether or not such claim, right or remedy arises in equity, under contract, by statute, under common law or otherwise.

I certify that I have read and agreed to the terms above. I further agree to pay all interest and expenses incurred by Vision Imaging Supplies, Inc. including legal fees that are necessary to collect amounts owed by this credit applicant.

 Officer/Owner/Partner Signature

 Date

 Officer/Owner/Partner Signature

 Date

 Please Print Full Name & Title

 Please Print Full Name & Title