



Request for Credit

Photodon, LLC Phone: 847.377.1185 Fax: 877.255.2570

Dear Customer,

We look forward to serving your needs. We require the following information to further our business relationship. Please print or type in the spaces provided. **Please complete all sections of this application.** The Credit Department fax line is (877)255.2570. Please make sure to advise your Photodon sales representative that you have faxed your credit application.

Photodon Representative: Don Basch 847.377.1185

Is this credit request needed for Resale Business Use Both

Business Information

Customer Account Number (s):		
Trade Name (Operating as):		
Parent Co/ Subsidiary of:		
Street Address:		
City:	State:	Zip Code:
Web Page:		
Invoice Mailing Address:		
Type of Business:	Years in Business:	
Telephone No. ()	D&B #:	
	Tax I.D#:	
Name of person requesting credit		
Amount of credit line requested		
What items are you interested in:		

Contact Information

Account Payable Contact Name:	Tel No. ()
E-Mail Address:	Fax No.()

Principle Officer(s)

Last Name	First Name	Title

Continued on next page

Banking Reference Information

Bank Name	City, State & Zip	Tel. No ()	Account No.
Address		Fax. No ()	Contact Name

Trade References

Business Name	City, State & Zip	Tel. No ()	Account No.
Address		Fax. No ()	Contact Name

Business Name	City, State & Zip	Tel. No ()	Account No.
Address		Fax. No ()	Contact Name

Financial Terms:

1. TERMS ARE NET 30 DAYS.
2. Any past due account is subject to suspension of credit privileges.
3. It is hereby understood and agreed upon that a complete financial and credit investigation will be carried out with conjunction of this application.
4. We certify that the information provided on this application is true and correct.
5. You are a Principle Officer of the Company requesting credit terms.

Prepayment Agreement:

If credit is granted the customer agrees and understands that Photodon's terms are Net 30 days. The customer further agrees and understands that any past due balance over 30 days beyond Photodon's payment terms may be subject to a 2.0% late fee. No late fees will be incurred against the customer without the customer first receiving a written intent to charge a late fee from Photodon or Collections Department.

Authorized Signature-Principle Officer

Print Name

Title

Date

Photodon, LLC
2682 Garfield Rd N, Ste 21
Traverse City, MI 49686 USA

Improving Your Image

Phone: 847.377.1185 Fax: 877.255.2570

Web Page: www.photodon.com E-mail: sales@photodon.com

March 2, 2011

FOR OFFICE USE ONLY:

Net ____ Terms Credit Amount: _____

Approved _____ Denied _____

Date: _____

Approved By: _____