www.HAmountings.com info@hamountings.com

Credit Application

		DESCRIPTION OF BUSINESS			
BUSINESS INFORMATION			DESCRIPTION OF BUSINESS		
NAME OF BUSINESS			CREDIT REQUESTED	BUSINESS YE.	ARS
LEGAL (IF DIFFERENT)			JBT ID NUMBER & RATING (if applicable)		
ADDRESS			BUSINESS STRUCTURE □ CORPORATION □ PARTNERSHIP □ PROPRIETORSHIP □ DIVISION / SUBSIDIARY NAME OF PARENT COMPANY		
CITY STATE ZIP					
PHONE ()	FAX ()				
EMAIL ADDRESS			BUSINESS YEARS		
COMPANY PRINCIPALS RESPONSIBLE FOR BUSINESS TRANSACTIONS					
NAME	TITLE AL	DDRESS		PHONE	
NAME	TITLE	DDRESS		PHONE	
NAME TITLE ADDRESS		PHONE			
BANK REFERENCES					
NAME OF BANK NAME OF CONTACT					
BRANCH BRANCH			ADDRESS		
CHECKING ACCOUNT NO.			PHONE NUMBER		
TRADE REFERENCES					
FIRM NAME	ADDRESS		TY, STATE, ZIP	PHONE NUMBER	FAX NUMBER
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				THE REAL PROPERTY.	

CONFIRMATION OF INFORMATION ACCURACY AND PERSONAL GUARRANTY

In consideration of credit extended I/we personally guarantee full and prompt payment according to terms granted of all invoices rendered. All past due indebtedness shall be subject to interest at the maximum rate allowable by law until paid. If my/our account is placed in the hands of attorney for collection, or if collection is made through bankruptcy or probate proceedings, I/we agree to pay a reasonable amount in attorney's fee on both the principal and interest charge. All charges are due and payable in full at 550 S. Hill Street, Suite 763, Los Angeles, CA. 90013. It is agreed that in any legal action, the laws of the State of California shall apply. I/we hereby consent to the personal jurisdiction of the courts of the State of California in any such proceeding and venue shall be proper in Los Angeles county. Notwithstanding billing arrangements, the undersigned accepts personal liability as insurer of the items received and guarantees payment of the purchase price set forth above. I/we agree to furnish financial information or statements as requested. I/we verify that all information supplied is true and correct.