



Credit Application

From: WISE InfoTech,LLC.
Phone: (732) 377-3376
Fax: (732) 358-0233

To process your credit application we ask that you provide us the following information. Please fill out this form completely, so that we can set account for your company. All the information provided in this application will be held in the strictest confidence.

Company Name: _____ Company Name: _____
Billing Address Shipping Address

Phone#: _____ Fax#: _____
Federal ID#: _____ Type of Business: _____
Year at Present Location: _____ Do you: Own () Rent ()
Landlord/Lien holder name & number: _____

Previous Address: _____

Has company ever declared Bankruptcy: Yes () No () When: _____
Corporation () Incorporation () Partnership () Proprietorship ()

Annual Sales Volume: 100K-200K () 200K-500K () 500K-1ML () 1ML above ()

Principal owners, Partners, or Stockholders:

President _____ Vice President _____

Controller _____ Acct. Payable Mgr. _____

New Jersey dealers: Please attach a copy of your resale certificates (Form ST-3.) If you are out of state, please provide your resale number below.

Dun & Bradstreet#: _____ Resale Cert#: _____
Accounts Payable Contact _____ Phone#: _____
Expected Monthly Volume _____ Expected Monthly Service _____

Bank Reference:

Name: _____ Phone#: _____ Fax#: _____

Address: _____ Account#: _____

_____ Contact Person _____



Bank Reference:

Name: _____ Phone#: _____ Fax#: _____

Address: _____ Account#: _____

_____ Contact Person _____

Trade Reference

Trade Name: _____ Phone#: _____
Address: _____ Fax#: _____

Trade Name: _____ Phone#: _____
Address: _____ Fax#: _____

Trade Name: _____ Phone#: _____
Address: _____ Fax#: _____

All statements made herein are true and accurate to the best of my knowledge. I do agree to promptly pay all invoices in accordance with **WISE InfoTech** terms that are expressed on the invoices. Instituted to collect any amount due, I do hereby personal guarantee to pay, in addition to the amount owed, all legal fees incurred; including a reasonable sum for attorneys fees. Regulated in all respects in accordance with relevant laws.

Signature: _____ Title: _____ Social Security#: _____

Please attach a copy of your most recent financial statement

I do hereby authorize **WISE InfoTech** to use the above information for the purposes agreed in this form and inquire with my bank and/or trade references and any other information they deem necessary.

Print Name: _____ Title: _____

Signature: _____ Date: _____



Bank Reference

To (Bank Name): _____

Date: / /

To whom it may concern:

The company referenced below has requested credit with our company and has given us your bank as a credit reference. We would appreciate you if you would provide us with the following information:

Type of Acct: _____ Date Acct. opened: _____

Current Balance: _____ Average Balance: _____

Any NSF Activity: Yes () No ()

Borrowing: Yes () No () Date of Last Deposit: _____

Bank Authority, Title & Date: _____

Credit Department
WISE InfoTech

We, _____ hereby authorize WISE InfoTech, LLC. to obtain our bank information as listed above. Please kindly reply ASAP. We deeply appreciate your assistance in this matter.

Company: _____

Address: _____

Account#: _____

Signature and Title: _____ Date: ____/____/____