



StrandVision Credit Application

Sales Rep: _____

Applicant:	Email:	Check One: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Other:
Business Name (If different from Applicant Name)	Phone:	
Address:	Fax:	
City: State:	Zip / Postal Code:	
Nature of Business:	Date Started:	

Credit Limit Requested: _____

D&B# _____

Terms Requested (must check one):

Open - Net 10

Open - Net 30

Credit Card

COD Company Check

COD Certified Check

Credit Card Information (required): Visa MasterCard Amex Discover

Card Number: _____ **Expiration Date:** _____ **Name on Card:** _____

CCID # _____ For additional security, we ask that you enter the 3-4 digit number located on the back of your credit card, on or near your signature panel.

I authorize StrandVision Digital Signage (StrandVision) to charge purchases to the above credit card. Past due balances on open accounts can also be charged after two notifications. This authorization will remain in effect until written notice of cancellation is received by StrandVision.

Print Name _____ **Billing Address:** _____

City/State/Zip: _____

Signature: _____ **Date:** _____

Suppliers / Trade References (related industry purchases during past 12 months)

Name	Phone	Fax	Account #

Bank References

Name	Account #	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan
Address	City/State/Zip	Phone/Fax
Name	Account #	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan
Address	City/State/Zip	Phone/Fax

Key Company Contacts

Accounts Payable:	Phone:	Email:
Controller / VP Finance:	Phone:	Email:
Purchasing Manager:	Phone:	Email:



Names of Owner(s), Officer(s) or Persons Responsible for Account

Name/ Title:	SS#	BirthDate:
Address	City/State/Zip	Phone:
Name/ Title:	SS#	BirthDate:
Address	City/State/Zip	Phone:

Number of employees: _____ **Of these employees, how many are:**

Administration: _____ Management: _____ Service: _____ Sales: _____ Manufacturing: _____ Warehouse: _____ Purchasers: _____ Other: _____

Number of physical locations: _____

APPLICATION FOR CREDIT

THE INFORMATION REQUESTED ON THIS APPLICANT IS FOR THE PURPOSE OF OBTAINING CREDIT ACCOUNT PRIVILEGES FROM STRANDVISION DIGITAL SIGNAGE (STRANDVISION). APPLICANT AND ANY GUARANTORS FOR THEMSELVES AND THEIR OFFICERS AND/OR MEMBERS AUTHORIZE STRANDVISION TO CONDUCT ANY INVESTIGATIONS DEEMED NECESSARY TO AUTHORIZE OPENINGS OR CONTINUATION OF THE ACCOUNT INCLUDING CREDIT INVESTIGATIONS OF THE APPLICANT, GUARANTORS, OFFICERS AND/OR MEMBERS OR PARTNERS OF THE APPLICANT.

Terms of Sale, including price, terms of payment and charges, for each purchase are agreed to be those specified on the face of each invoice. The above information is willingly supplied and StrandVision is authorized to contact the above bank and trade references in order to establish the creditworthiness of the above named company. If applicant is not a corporation or is a newly formed corporation or under new management, then StrandVision is authorized to obtain credit reports about proprietors, partners or principles. Should credit availability be granted by StrandVision, all decisions with the respect to the extension or continuation shall be in the sole discretion of StrandVision. StrandVision may terminate any credit availability within its' sole discretion. We further agree that if the services or merchandise ordered shall remain past the due date, it shall bear interest at the rate of 1.5 % per month until paid. After two attempts to collect unpaid balances, the credit card will be charged with a 3% surcharge. In the event that any suit or action is instituted to collect money due on our account, whether principal or interest, or both, we agree to pay, in addition to the amount owed, all costs of collection or legal fees plus an amount equal to 25% of principal balance should applicant not make payment pursuant to StrandVision's terms. Any legal suits may be commenced in the State of Wisconsin, County of Dunn and the undersigned waives any right to a trial by jury. Any disputes to any charges must be registered in writing within 5 business days from receipt of any invoice. I have read the above conditions and hereby agree to them.

Signed _____ Title (if corporation) _____ Date _____
 (*Must be signed by an officer of corporation or owner for application to be processed)

***** CURRENT YEAR-END FINANCIAL STATEMENTS ARE REQUIRED FOR NET TERMS *****
 Financial statements must include a balance sheet and income statement. Unaudited financial statements must be signed and dated by the Company's Owner/Officer. The statement's time period must be indicated.



GUARANTY AGREEMENT

In consideration of the sale of merchandise by StrandVision Digital Signage (StrandVision) to the applicant, the undersigned hereby unconditionally guarantees to StrandVision the payment of any existing or future indebtedness which the APPLICANT owes to StrandVision in any manner whatsoever without limitation as to amount (the "Debt"). This guaranty shall be a continuing guaranty independent of and in addition to any other security, collateral or guaranty held by StrandVision and shall not be impaired by any neglect, failure or omission to realize upon any extension of credit in excess of the initial credit limit or by renewal, modification, compromise or discharge of the Debt or any part thereof with any party obligated on the Debt. The liability of the undersigned shall be direct, immediate and absolute and not be conditional or contingent upon the pursuit or prosecution by StrandVision of any other remedy or remedies whatsoever, and StrandVision shall have against the undersigned any and all rights and remedies it might have against the APPLICANT. The undersigned consents to StrandVision obtaining a consumer credit report on undersigned for the purpose of evaluating the creditworthiness of APPLICANT in connection with an application for business credit.

Dated this _____ of _____, _____

Witness: _____ Signature of Guarantor: _____

Print Name: _____

SSN: _____

Birth Date: _____

Drivers License #: _____

Home Address: _____

Witness: _____ Signature of Guarantor: _____

Print Name: _____

SSN: _____

Birth Date: _____

Drivers License #: _____

Home Address: _____
