



CREDIT APPLICATION

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_
Bill to Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Ship to Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Form of Ownership: \_\_\_ Individual \_\_\_ Partnership \_\_\_ Corporation \_\_\_ LLC Fed ID: \_\_\_\_\_
Owners'/Partners'/Officers' Names Address Official Title
Bank Name: \_\_\_\_\_ Name of Bank Officer: \_\_\_\_\_
Account Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Credit References:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Do you require purchase orders? \_\_\_ Yes \_\_\_ No

Has this Company or any officers, directors or owners of the company ever filed a voluntary petition in Bankruptcy, been adjusted bankrupt or made an assignment for the benefit of creditors? \_\_\_ Yes \_\_\_ No

If yes, Who and When: \_\_\_\_\_

Has a tax lien or civil suit been filed against this company or any of its officers, directors or owners within the past five years? \_\_\_ Yes \_\_\_ No How long in business: \_\_\_\_\_

I/We apply for credit and will abide by the terms and condition of Freedom Innovations, LLC. I understand, acknowledge and accept these terms of sales. Our signature(s) represents our authorization for Freedom Innovations, LLC. to check our credit.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_
Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant agrees that all invoices due to Freedom Innovations, LLC will be paid on time on net 30 day terms. Applicant also agrees to pay to Freedom Innovations, LLC reasonable attorney and/or collection expenses incurred as a result of a past indebtedness of 60 days or more. It shall not be necessary for Freedom Innovations, LLC in order to enforce the obligation of the undersigned hereunder, to first institute suite or pursue or exhaust its remedies against the applicant. The undersigned does hereby personally guarantee payment of all indebtedness incurred by the above applicant to Freedom Innovations, LLC, whether now due or hereafter incurred. If more than one individual signs below, each shall be liable hereunder jointly and severally. The guarantee shall remain in full force and effect until released by Freedom Innovations, LLC in writing or until notice is received by Freedom Innovations, LLC from the undersigned, although such notice by the undersigned shall apply only to indebtedness arising thereafter and shall not affect the guarantee of indebtedness then existing.

Dated: \_\_\_\_\_ Signature, rendered as individual guarantor Printed Name

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature, rendered as individual guarantor

\_\_\_\_\_  
Printed Name

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