

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

Marquee Luxury Wheels 15320 Valley View Ave. Suite #1

La Mirada CA 90638

Tel: 562-944-8883 Fax: 562-944-0187

BUSINESS	CONTACT INFO	RMATION		
Name:		Title:		
Owner: Partner:	President:	Vice President:	Other:	
Company Name:				
Company Address:				
Phone: ()		Fax: ()		
City:	State:	Zip Code:		
Credit Request: \$				
Years in Business:		Email:		
TYPE OF BUSINESS:				
Sole Proprietorship: Partnership:	Corporation:	Non Profit Corp:	Other:	
Incorporated under the laws of which State:				
Business Tax Id Number or Employer ID Num	ber:			
BUSINESS	CONTACT INFO	RMATION		
President:	CONTACT INTO	Tel: Fax	•	
Mailing Address:		· · · ·		
City:	State:	Zip Code:		
Accounts Payable:		Tel: Fax	:	
Mailing Address:	Ictoto:	7:5 Codo		
City:	State:	Zip Code:		
В	ANK REFERENCE			
Bank Name:	Bank Address:			
City:	State:	Zip Code:		
Tel:	Fax:			
Type of Account: Savings:	Checking:	Other:		
Account Number :		Bank Contact Name:		
BUSINESS TRADE REFERENCES				
Company Name:	SS TRADE REFER	REINCES		
Address:		Email:		
Phone: ()		Fax: ()		
City:	State:	Zip Code:		
Type of Account:	otate.	Zip code:		
1,750 01,7100001111				
Company Name:				
Address:		Email:		
Phone: ()		Fax: ()		
City:	State:	Zip Code:		
Type of Account:	-	<u> </u>		
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BUSINESS TRADE REFERENCES -Con't				
Company Name:				
Address:		Email:		
Phone: ()		Fax: ()		
City:	State:	Zip Code:		
Type of Account:				

Any information gathered from the above references will be used by BSI Wheels, Inc. solely for the purpose of extending Trade Credit. The Undersigned:

- * Warrants that the above information is true and correct.
- * Agrees that payment of all invoices will be according to the terms established by BSI Wheels, Inc. and understands that all invoices not paid by date due are considered past due and are subject to interest charges.
- * Agrees to pay interest on past due amounts of 2% per month or the maximum interest rate permitted by applicable law, whichever is less.
- * Agrees to be responsible for all outside agency and legal costs and fees associated with the collection of any past due balances/debts.
- * Represents that, as of this date, the applicant is solvent to pay its debts as they become due.

Name:	Name:
Title:	Title:
Signature:	Signature:
Date:	Date:

The undersigned personally and fully guarantees all debts and liabilities incurred both now and in the future by the applicant who has signed or in whose behalf the authorized representative signed this credit application and has been extended credit. Guarantor/s recognize/s, understand/s and agree/s that this Guarantee cannot be revoked or rescinded if any dept or liability of applicant remains outstanding, and hereby authorize/s BSI Wheels, Inc. to investigate guarantors personal finance and credit information via direct contact and/or a credit reporting agency.

Guarantor:	Guarantor:
Date:	Date:

PLEASE ATTACH A COPY OF YOUR CURRENT RESALE CERTIFICATE & BUSINESS LICENSE.