

CREDIT APPLICATION

This form can be filled out on your computer, and printed out to fax back.

GENERAL INFORMATION

Business Trade Name (DBA)

Business Legal Name (as it appears on business license)

Business Address (City/State/Zip)

Telephone

Fax*

Officers Names and Titles

This company is a (check one)

Sole Proprietorship Partnership Corporation

If incorporated, in what state?

Length of time operating under the above named business.

Length of time at the above address.

Is the billing address the same as your business? Yes No

If no, give details.

BANK INFORMATION

1st Bank Name

2nd Bank Name

Address

Address

City/State/Zip

City/State/Zip

Telephone

Telephone

Checking Account #(s)

Checking Account #(s)

TRADE REFERENCES - Need at least 3

Company Name/Acct #

Telephone

Fax*

Contact

*All information will be held in the strictest confidence. Naturally we would be happy to reciprocate anytime.
Please reply by *Fax: 321-951-2139 attn: Jen Hardin, or direct email <mailto:jen@imcopexamerica.com> thank you.*

*Failure to provide fax # for Trade References will result in delay of application processing.

AGREEMENT AND DISCLOSURE

THIS CREDIT APPLICATION AND AGREEMENT IS SUBMITTED BY CUSTOMER TO IMCOPEX AMERICA TO OBTAIN TRADE CREDIT. CUSTOMER AGREES TO MAKE PAYMENT IN FULL TO IMCOPEX AMERICA FOR ALL AMOUNTS DUE ACCORDING TO IMCOPEX AMERICA'S INVOICE(S). CUSTOMER ALSO AGREES TO PAY IMCOPEX AMERICA ANY INTEREST, AN AMOUNT EQUAL TO 1.5% PER MONTH OR THE MAXIMUM ALLOWED BY LAW, WHICHEVER IS LESS, FOR INVOICE AMOUNTS THAT ARE PAST DUE. SHOULD CUSTOMER DEFAULT IN ANY SUCH PAYMENT(S). IMCOPEX AMERICA SHALL HAVE THE RIGHT, WITHOUT NOTICE TO CUSTOMER, TO DECLARE ALL INVOICE AMOUNTS DUE AND PAYABLE IN THE EVENT IMCOPEX AMERICA SHOULD COMMERCE ANY ACTION OR ACTIONS OR, OTHERWISE ACT TO ENFORCE THIS AGREEMENT AGAINST CUSTOMER AGREES TO PAY REASONABLE ATTORNEY(S) FEES, COURT COSTS AND OTHER EXPENSES INCURRED BY IMCOPEX AMERICA WHETHER OR NOT SUITE IS FILED, THE AGREEMENT IS STRICTLY CONFIDENTIAL AND IS NOT TRANSFERABLE OR ASSIGNABLE WITHOUT THE PRIOR WRITTEN CONSENT OF IMCOPEX AMERICA, CUSTOMER AGREES THAT ANY CHANGE IN LIABILITY FOR, ANY DEBT INCURRED TO IMCOPEX AMERICA, DUE TO A CHANGE IN CUSTOMERS FORM OF BUSINESS, SHALL NOT BE EFFECTIVE AS TO IMCOPEX AMERICA, UNTIL IMCOPEX AMERICA RECEIVES ACTUAL, NOTICE OF THE CHANGE BY CERTIFIED MAIL.

BY SIGNING THIS AGREEMENT, I/WE AUTHORIZE THE RELEASE OF CREDIT AND BANKING INFORMATION TO IMCOPEX AMERICA BY THE REFERENCES LISTED ABOVE.

Signed at	as of this	day of	,20
Officer/Owner Signature <i>(please print out and sign)</i>		Print Name and Title	

PERSONAL GUARANTY

I/WE THE UNDERSIGNED AGREE TO THE ABOVE TERMS AND THE UNDERSIGNED IS/ARE RESPONSIBLE FOR PAYMENT OF ANY OBLIGATION OF THE APPLICANT OWING TO IMCOPEX AMERICA. ("CREDITOR"), WHETHER CREATED UNDER THE APPLICATION, AN ACCOUNT ARISING FROM SUCH APPLICATION, OR ANY OBLIGATION OF APPLICANT TO CREDITOR REGARDLESS OF THE BASIS OR SOURCE, WHETHER NOW EXISTING, OR HEREINAFTER CREATED. IN CONSIDERATION FOR CREDITOR EXTENDING THE CREDIT TO THE ABOVE APPLICANT AT MY/OUR REQUEST, I/WE HEREBY PERSONALLY GUARANTEE THE PAYMENT OF ALL THEIR OBLIGATIONS TO CREDITOR. I/WE WAIVE NOTICE OF ACCEPTANCE OF THE GUARANTEE, NOTICE OF THE SALE OF GOODS, WARES AND MERCHANDISE SOLD BY CREDITOR TO THE APPLICANT DESIGNATED ABOVE, NOTICE OF DEFAULT AND NOTICE OF TERMINATION OR RELEASE OF ANY OTHER GUARANTOR. I/WE CONSENT THE EXTENSION OF TIME OF PAYMENT OF THE INDEBTEDNESS OR ANY PORTION THEREOF. LIABILITY OF THE UNDERSIGNED SHALL NOT BE AFFECTED OR PREJUDICES BY THE ADDITIONAL ACCEPTANCE OF A NOTE OR EVIDENCE OF INDEBTEDNESS, THE EXTENSION OF TIME, PAYMENT ARRANGEMENT OR OTHER INDULGENCE GRANTED TO DEBTOR, OR BY AGREEMENT AFFECTION SAID INDEBTEDNESS, AND THE UNDERSIGNED HEREBY WAIVE NOTICE OF ALL OF THE AFORESAID. CREDITOR SHALL NOT BE REQUIRED TO INSTITUTE LEGAL PROCEEDING AGAINST THE DEBTOR ANY GUARANTOR PRIOR TO ANY ONE GUARANTOR BECOMING OBLIGATED TO MAKE PAYMENT ON THE ACCOUNT PURSUANT TO THIS GUARANTEE. I/WE DO FURTHER AGREE THAT THIS MATTER IS PLACED IN THE HANDS OF AN ATTORNEY FOR COLLECTION, OR IF COLLECTION IS MADE THROUGH PROBATE PROCEEDING, TO PAY A REASONABLE AMOUNT IN ATTORNEY'S FEES, COURT COSTS AND EXPENSES INCURRED, INCLUDING ANY COLLECTION FEES, ON BOTH THE PRINCIPAL AND INTEREST CHARGES, REGARDLESS OF WHETHER SUIT IS FILED. I/WE ACKNOWLEDGE THAT I/WE HAVE READ THE FULL TERMS AND PROVISIONS OF THE APPLICATION AND GUARANTEE, AND THAT CERTAIN PROVISIONS OUTSIDE THIS SECTION ENTITLED "PERSONAL GUARANTY" SHALL BE BINDING AND CREATE OBLIGATIONS AND DUTIES ON THE PART OF GUARANTORS.

GUARANTORS *(please print out to finish this information)*

Signature	Signature
Printed	Printed
Date	Date
SSN	SSN