

# LEVI SINK CO.

Customer Application/ Credit Application

## GENERAL APPLICANT INFORMATION

Company Name  Sole Proprietor  Corporation  Partnership  
Billing Address City State ZIP  
Delivery Address City State ZIP  
Office Phone Office Fax  
Primary Contact Cell Phone  
Federal EIN # How Long in Business? Has the company/owner ever been bankrupt?  
Office E-Mail (Statements sent via E-Mail)

## TAX STATUS

Please Charge Me \_\_\_\_% Sales Tax. Enter Percentage and Jurisdiction Name for Each and Circle Any Unincorporated City/County  
City \_\_\_\_\_ / \_\_\_\_% County: \_\_\_\_\_ / \_\_\_\_% State \_\_\_\_ / \_\_\_\_%  
 Sales Tax Should Not Be Charged (Attach Your State Tax Resale Certificate) **Sales Tax I.D. #**

## PRINCIPAL CHIEF/OWNER INFORMATION

Name  
Personal Address City State ZIP  
Social Security Number Date of Birth  
Phone Number

## REFERENCES

*Please list two professional references, either 2 trade references or 1 trade reference and 1 bank reference.*

Company Account #  
Contact Person Phone ( )  
Address  
Company Account #  
Contact Person Phone ( )  
Address

## CREDIT CARD AUTHORIZATION

Visa  MasterCard  Amer Express Card # Exp CVC #  
Address (As it appears on statement)  
Cardholder Name

## TERMS AND CONDITIONS AGREEMENT

I, \_\_\_\_\_, authorize Levi Sink Company to request and obtain consumer credit reports on me and my business in connection with the opening, monitoring, renewal, and extension of this and other accounts with Levi Sink Company and the marketing of other products and services to me and my business by Levi Sink Company. If I request, you will tell me whether my consumer credit report was requested and, if so the name and address of the consumer credit agency that furnished the report. I authorize Levi Sink Company to make inquiries into the banking or business/trade references that have been supplied. The Undersigned individual agrees to be held responsible for completing the duties and obligations of a debtor to a lender, in the event that the debtor fails to fulfill the terms of this Terms and Conditions Agreement. You agree for Levi Sink Company to charge any credit card on file for any unpaid invoices beyond 45 days old, at our discretion. The Undersigned agrees to be held liable for all payments and interest owed to Levi Sink Co. in the event that the Applicant fails to adhere to the terms set forth in this application of credit. In consideration of lending credit to the Applicant, the Undersigned acknowledges that this Terms and Conditions Agreement have been read and the Undersigned is aware of the contents of the Terms and Condition Agreement. The Undersigned agrees to be bound by the Terms and Conditions Agreement to the same extent as the Applicant. The obligation imposes individual liability on the Undersigned as well as joint liability with the Applicant. The Undersigned has sufficient interest in the performance of this obligation to execute this agreement and is fully empowered to exercise this agreement.

X \_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed Name of Owner

X \_\_\_\_\_  
Signature of Witness

**CONSIGNMENT AGREEMENT**

**AMOUNT REQUESTED \$** \_\_\_\_\_

The following information is needed on file for ALL CUSTOMERS WHO WOULD LIKE CONSIGNMENT. As a consignment customer, you are expected to pay for items that your representative determines are sold/missing on the restock day. Failure to pay for these items immediately will result in charge(s) to your credit card until the entire balance owed is obtained. Multiple charges may be necessary to process the entire balance. In the event that an insufficient check is given, your credit card will be charged for the amount of the check, plus a \$25 NSF Fee. In addition to the initial funds verification on each card below, we hold the right to verify funds at any time you are in possession of items not paid for or in the event that there is an unpaid balance on your account. At any time there is an insufficient amount available to be charged on your card to cover the amount of consignment items in your possession, we hold the right to terminate the consignment agreement. By signing and providing info below, you agree to these terms.

X \_\_\_\_\_ as a representative of \_\_\_\_\_.

Signature: \_\_\_\_\_ Witness: \_\_\_\_\_

Visa  MasterCard  American Express Card No. Expiration (xx/20xx) CVC # Last 3 on back of card (Last 4 for Amex)

Address (As it appears on statement)

Cardholder Name

Credit Card #1 Funds Verification in the amount of \$  Approved  Declined  Approved for the amount of \$

Visa  MasterCard  American Express Card No. Expiration (xx/20xx) CVC # Last 3 on back of card (Last 4 for Amex)

Address (As it appears on statement)

Cardholder Name

Credit Card #2 Funds Verification in the amount of \$  Approved  Declined  Approved for the amount of \$

**FOR OFFICE USE ONLY**

Approved For Consignment  Declined For Consignment  
Sales Representative Supporting Documents Attached  D  Other:

Agreement Code Assigned Terms Accepted Date

Notes: