

UNITED WESTERN DENVER, INC BUSINESS CREDIT APPLICATION

| ACCOUNTS PAYABLE CONTACT | |
|--------------------------|-------|
| NAME | TITLE |
| EMAIL | PHONE |

| BUSINESS INFORMATION AS REGISTERED | | |
|---|-------|----------|
| COMPANY NAME | | |
| ADDRESS | PHONE | |
| CITY | STATE | ZIP CODE |
| LENGTH OF TIME AT CURRENT ADDRESS: _____ YEARS _____ MONTHS | | |
| TYPE OF BUSINESS : SOLE PROPRIETORSHIP PARTNERSHIP LLC CORPORTATION OTHER | | |
| DATE BUSINESS STARTED _____ OWN/RENT PROPERTY _____ | | |

| BANK INFORMATION | | |
|------------------|----------------|----------|
| BANK NAME | CONTACT NAME | |
| ADDRESS | PHONE | |
| CITY | STATE | ZIP CODE |
| TYPE OF ACCOUNT | ACCOUNT NUMBER | |
| SAVINGS | | |
| CHECKING | | |
| OTHER | | |

Federal ID# or SSN# _____ Dun & Bradstreet # _____
 TAXABLE /TAX EXEMPT _____ EXEMPT CERTIFICATE REQUIRED OR TAX CHARGED
 CREDIT AMOUNT REQUESTED _____

| BUSINESS REFERENCES | | |
|---|--------------|----------|
| Please provide us at least three other companies your business has established credit with previously | | |
| 1 COMPANY | CONTACT NAME | |
| PHONE | EMAIL | |
| ADDRESS | TITLE | |
| CITY | STATE | ZIP CODE |
| COMMENTS | | |
| 2 COMPANY | CONTACT NAME | |
| PHONE | EMAIL | |
| ADDRESS | TITLE | |
| CITY | STATE | ZIP CODE |
| COMMENTS | | |



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| | | | |
|-------------|-------|--------------|--|
| 3 COMPANY | | CONTACT NAME | |
| PHONE | | EMAIL | |
| ADDRESS | | TITLE | |
| CITY | STATE | ZIP CODE | |
| COMMENTS | | | |
| 4 COMPANY | | CONTACT NAME | |
| PHONE | | EMAIL | |
| ADDRESS | | TITLE | |
| CITY | STATE | ZIP CODE | |
| COMMENTS | | | |

| |
|---|
| CREDIT AGREEMENT |
| <p>1 All invoices must be paid within 30 days of the date issued</p> <p>2 Any claims regarding an invoice issued must be made within 7 days of the date issued</p> <p>3 You authorize inquiry into the banking and business references provided within this application</p> |

| | |
|--------------------------------|-------|
| COMPANY REPRESENTATIVES | |
| 1 SIGNATURE | TITLE |
| NAME | DATE |

| | |
|---------------|-------|
| 2 SIGNATURE | TITLE |
| NAME | DATE |

| |
|--|
| NOTES & COMMENTS |
| <p>The undersigned warrants that all of the above information is true, accurate, and complete and that the individual signing this Agreement had the authority to enter this Agreement on behalf of the applicant. In consideration for extending credit, the undersigned hereby agrees to: Pay its account on or before the date it becomes due and, in the event of overdue payments, agrees to pay: A) interest at the maximum allowed rate on the overdue amount and, B) all collection and/or attorney fees incurred in attempting to collect the overdue amount. The undersigned further agrees that terms of payment shall be Net 30 days from invoice date, for. all purchases.</p> <p>The undersigned gives its permission to contact all Trade References and Bank Reference listed above.</p> |

