

BETTER HOME PRODUCTS

534 Eccles Ave, South San Francisco, CA 94080-1979, Phone: 650-827-9270, Fax: 650-827-9271

CREDIT APPLICATION

COMPANY NAME: _____
 BILLING ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 SHIPPING ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 OWNER'S NAME: _____
 PRESIDENT'S NAME: _____
 BUYER'S NAME: _____
 ACCTS PAYABLE CONTACT NAME: _____

PHONE NUMBER _____
 FAX NUMBER _____
 RESALE NUMBER _____
 TAX I.D. NUMBER _____
 Check One:
 CORPORATION
 PARTNERSHIP
 INDIVIDUAL
 OTHER (specify) _____
 HOW ARE INVOICES GENERALLY PAID?
 Check One:
 DISCOUNT
 30 DAYS

TYPE OF BUSINESS: _____ NUMBER OF EMPLOYEES: _____ ANNUAL SALES: \$ _____
 YEAR ESTABLISHED: _____ AT PRESENT LOCATION SINCE: _____
 NAME OF BANK: _____ ACCT. NUMBER: _____
 CONTACT PERSON: _____ PHONE NUMBER: _____
 ADDRESS: _____ FAX NUMBER: _____
 CITY: _____ STATE: _____ ZIP: _____

Amount of credit requested:
 \$ _____
 (\$5,000 and over requires personal guarantee by one or more of the owners)

PLEASE LIST **THREE** CREDIT REFERENCES:

1

2

3

Company Name			
Street Address			
City/State/Zip			
Phone #			
Fax #			
Contact Name			

CREDIT TERMS: Upon approval of credit, Better Home Products credit terms are Net 30. A 3% 10-day payment discount is available for early payment. The early payment discount will not be accepted on any payments arriving later than 15 days after date of invoice. If invoices become past due, we reserve the right to stop shipment of any pending orders or backorders. In the event collection of an account must be enforced, all attorney's fees, court costs and collection fees are to be paid by the debtor.

I (we) certify that the above information is true and correct and that I (we) will comply with your terms.

SIGNATURE: _____ TITLE: _____ DATE: _____