

## New Account Application

PAYMENT TYPE: <input type="checkbox"/> Credit Card <input type="checkbox"/> COD <input type="checkbox"/> Net Terms (Must complete attached application)	
LEGAL BUSINESS NAME:	
TRADING AS (dba) / OTHER NAMES USE BY BUSINESS:	
ORGANIZATION FORM:	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation - State <input type="checkbox"/> LLC
STORE TYPE:	<input type="checkbox"/> Boutique <input type="checkbox"/> Chain <input type="checkbox"/> Internet <input type="checkbox"/> Seasonal <input type="checkbox"/> Others _____
BILLING ADDRESS:	
PHONE:	FAX:
SHIP TO ADDRESS: (Attach separate sheet for multiple ship to locations)	
PHONE:	FAX:
WEBSITE:	
PRINCIPAL CONTACT NAME:	
PRINCIPAL CONTACT NAME:	CONTACT TITLE:
CONTACT PHONE:	CONTACT EMAIL:
A/P CONTACT:	A/P EMAIL:

I state that all information forth mentioned is true, and I herely authorize Golyta International to use these information for credit check and verification purposes.

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

Print Name: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Job Title: \_\_\_\_\_

## Credit Terms Application

Please provide the following information.

CORPORATE INFORMATION			
LEGAL BUSINESS NAME:			
ADDRESS:			
City:	State:	Zip:	Country:
Phone:		Fax:	
TAX ID NO:		Business Established on:	

Identify all owners for proprietorship, partners of partnership, managing director of LLC and officers for corporation.

OWNERSHIP	
NAME:	POSITION:
HOME ADDRESS:	
HOME PHONE:	EMAIL:
NAME:	POSITION:
HOME ADDRESS:	
HOME PHONE:	EMAIL:
NAME:	POSITION:
HOME ADDRESS:	
HOME PHONE:	EMAIL:

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

Print Name: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Job Title: \_\_\_\_\_

## Bank References

Please provide one or more bank references.

BANK NAME:	
BANK ADDRESS:	
NAME ON ACCOUNT:	ACCOUNT NO.:
CONTACT NAME:	CONTACT TITLE:
CONTACT PHONE:	CONTACT FAX:

BANK NAME:	
BANK ADDRESS:	
NAME ON ACCOUNT:	ACCOUNT NO.:
CONTACT NAME:	CONTACT TITLE:
CONTACT PHONE:	CONTACT FAX:

BANK NAME:	
BANK ADDRESS:	
NAME ON ACCOUNT:	ACCOUNT NO.:
CONTACT NAME:	CONTACT TITLE:
CONTACT PHONE:	CONTACT FAX:

I authorize the above listed banks to release credit information about my account standing, credit line, and payment history to Golyta International to be used explicitly for the establishment of an open account and credit line. This information is to be kept within the strictest of confidence.

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

Print Name: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Job Title: \_\_\_\_\_

## Trade References

Please provide three trade references. Golyta International will submit this application to Hana Financial for approval. Please allow at least one week for processing. If you need to place orders before credit is approved, we can process them on credit card or COD cashier's check.

COMPANY NAME:	
ADDRESS:	
CONTACT NAME:	ACCOUNT NO.:
PHONE:	FAX:

COMPANY NAME:	
ADDRESS:	
CONTACT NAME:	ACCOUNT NO.:
PHONE:	FAX:

COMPANY NAME:	
ADDRESS:	
CONTACT NAME:	ACCOUNT NO.:
PHONE:	FAX:

I state that all information forth mentioned is true, I hereby authorize Golyta International to use these information for credit check and verification purposes. I have read, understand and on behalf of the Applicant, accept the terms of the attached Security Agreement and Guarantee. For the purpose of obtaining credit from Golyta International, Applicant hereby authorizes Golyta International, or its agents, to investigate the Applicant's personal, partnership and/or corporate credit and financial responsibility from time to time, in Golyta International's sole discretion.

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

Print Name: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Job Title: \_\_\_\_\_

## Security Agreement and Guarantee

For the purpose of obtaining credit from Golyta International, Applicant agrees as follows:

- Applicant represents that the information supplied herein is in all respects complete, accurate, and truthful. Applicant agrees to notify Golyta International promptly, in writing, of any substantive changes in the information provided.
- Applicant agrees to pay in full for goods provided (without deduction or setoff) on or before the due date specified on the invoice to the address on the invoice. Any amounts not paid when due shall be thereafter assessed a service charge at the rate of 1.5% per month (18% per annum) or the highest rate allowed by law. A \$30.00 administrative fee will be charged for all returned checks, regardless of circumstances.
- If Applicant fails to timely pay, or if its account is given to a third party for collection or if Golyta International is required to file any action or claim to secure timely collection, Applicant shall pay any and all expenses of collection and attempted collection, court costs and reasonable attorney's fees, in addition to all other amounts due.
- The failure of Golyta International to charge interest on Applicant's account or pursue any other remedy available to it shall not constitute any waiver by Golyta International.
- The acceptance of this application by Golyta International does not constitute an agreement to extend credit or to provide goods or services to Applicant. Golyta International in its absolute discretion, may deny, set, extend, terminate, renew or modify credit limits from time to time, with or without notice to Applicant.
- In the event Applicant or any affiliate of Applicant (i.e. a company or other entity under common control) defaults in the payment of any sums due to Golyta International, all other amounts due from Applicant or any affiliate shall be immediately due and payable.
- Applicant agrees that Golyta International may set off against monies due it from Applicant or any affiliate any monies owed by Golyta International to Applicant or any affiliate. Applicant agrees that he/she will not set off against any amounts due Golyta International or claimed to be due to Applicant from Golyta International.
- If anyone or more of these terms becomes invalid or illegal in any respect, such term or terms shall be waived, and the validity, legality and enforceability of the remaining terms shall not be affected.
- All billing disputes must be submitted to Golyta International no later than 30 days following date of billing. Any billing not challenged within 30 days will be deemed accepted and it is agreed and will not thereafter be subject to any dispute by Applicant. No adjustments will be accepted based only on verbal notification received by Golyta International.
- The undersigned hereby guarantees the due payment by Applicant of all sums that may be owed, now or in the future, to Golyta International and agrees that this is a continuing Guarantee and that no notice of the indebtedness currently due or extended in the future need be given. This Guarantee shall not be affected by any modification or termination of the terms of credit by Golyta International.
- Any dispute with Golyta International shall be under the exclusive jurisdiction of and venue in the state and federal courts located in Los Angeles County, California. In no event shall Golyta International be liable for coincidental or consequential damages. This provision shall apply regardless of whether such damages were foreseeable. In no event shall Golyta International be liable for punitive damages.

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

Print Name: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Job Title: \_\_\_\_\_