

CREDIT APPLICATION AGREEMENT

Business Name: _____ Years in Business _____ Statement filed with D&B? _____
D/B/A (if applicable): _____ Business Phone: _____ Fax: _____ Email: _____
Type of Business (check one) Proprietorship ___ Partnership ___ Corporation ___ LLC ___

Address: _____
City: _____ State: _____ Zip Code: _____ Phone #: _____

Names of Principals

Titles

1) _____
2) _____

| Credit References (Name & Address) | City & State | Phone # | Account #'s |
|------------------------------------|--------------|---------|-------------|
|------------------------------------|--------------|---------|-------------|

| | | | |
|----------|-------|-------|-------|
| 1) _____ | _____ | _____ | _____ |
| 2) _____ | _____ | _____ | _____ |
| 3) _____ | _____ | _____ | _____ |

We give permission to contact our bank for routine credit information.

Bank: _____ Person to Contact: _____
Street: _____ City, State: _____ Zip Code: _____
Ant#: _____

If your company is a branch, division or subsidiary of another company, please specify that exact relationship. _____

If you do business under any other names, please list here. _____

RESALE # _____ PLEASE ATTACH COPY OF RESALE CERTIFICATE

I (we) hereby agree to the following:

- 1) That a Representative of Incrediwear may contact any person above for verification of facts and payments of funds.
- 2) That I (we) will notify you immediately of any changes of the above facts.
- 3) That I (we) will pay a late charge of 1-1/2 % (which is an 18% annual percentage rate) on the unpaid balance of my (our) account on the first of each month or the maximum allowable under applicable state law, whichever is less.
- 4) That all invoices will be paid within the terms indicated to prevent termination of credit.
- 5) That I (we) will pay any attorney fees or court costs required to collect an unpaid balance.

I (we) understand that the information furnished on this form may be relied upon by Incrediwear in extending credit and certify to Incrediwear that all such information is true and correct.

Signature _____ Date _____