



1245 Trapp Road, Eagan, MN 55121
 800.INSTALL (467.8255) 651.688.6833
 fax 800.352.4616 651.289.3308

Credit Application

CA
SLS#

BILL TO

Business Name _____
 Street or P.O. Box _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

SHIP TO (if different)

Business Name _____
 Street _____
 City _____ State _____ Zip _____

If subsidiary- Legal Name, Address and Phone of Parent Company

TYPE OF BUSINESS

Business Telephone-10 Custom Home Installer-20 Electronics Retailer/Rent to Own/Radio Shack- 30 Incentive/ASI - 40 Other (Please describe) _____

OWNERS/OFFICERS

Please note: At least one person listed below must sign page 2.

Name _____	Name _____	Name _____
Title _____	Title _____	Title _____
Soc. Sec.# _____	Soc. Sec.# _____	Soc. Sec.# _____
Home Address _____	Home Address _____	Home Address _____
City/State/Zip _____	City/State/Zip _____	City/State/Zip _____
Home Phone _____	Home Phone _____	Home Phone _____
Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No
Authorized to sign legal documents by corporate resolution? <input type="checkbox"/> Yes <input type="checkbox"/> No	Authorized to sign legal documents by corporate resolution? <input type="checkbox"/> Yes <input type="checkbox"/> No	Authorized to sign legal documents by corporate resolution? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have Owners/Officers previously done business with Capitol Sales Inc? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, under what name? _____		

Account#
Pro#

BUSINESS STRUCTURE AND TAX INFORMATION

C-Corp S-Corp LLC LLP Partnership Sole Proprietorship

Federal ID Number _____ State of Incorporation _____ In business since/ Date of Incorporation _____

State Resale Number (You must provide your state's specific resale and tax use exemption certificate. (MN, IA, IL, and WI businesses will not be setup without the proper form). _____

ACCOUNTING/BILLING CONTACT

Name _____	email address _____	Phone _____	Fax _____
Please send monthly statements via: <input type="checkbox"/> email address if different _____ <input type="checkbox"/> regular mail _____		Please send invoices via: <input type="checkbox"/> email address if different _____ <input type="checkbox"/> regular mail _____	

PURCHASING CONTACTS

Name _____	Name _____	Name _____
Title _____	Title _____	Title _____
Email Address _____	Email Address _____	Email Address _____

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BANK AND TRADE REFERENCES (You may include a separate sheet with your bank and trade references listed.)

Credit Application for (Company Name)

BANK REFERENCE (Required for net terms and check by phone)

Bank	Bank Contact	Phone
Checking Account Number	Savings Account Number	Money Market Account Number

TRADE REFERENCES (Required for net term applications)

Company Name	Company Name	Company Name
Address	Address	Address
Phone	Phone	Phone
Acct #	Acct #	Acct #

FINANCIAL STATEMENTS

If available please include your last three years of financial statements. You may email these documents to account@capitolsales.com In the subject line please type: FINANCIALS FOR NET APPLICATION
 Or provide the web address your financials can be found on _____

TERMS AND CONDITIONS

All information, as well as the attached financial statement contained in this credit application, are for the sole purpose of obtaining credit and are warranted to be true. The applicant agrees to promptly notify Capitol Sales Company, Inc. in writing via certified mail within 30 days of any material changes in this information, including but not limited to ownership or articles of incorporation changes. I/we hereby authorize Capitol Sales Company to verify information contained herein, including but not limited to bank references, trade references, consumer and/or commercial credit reporting agencies. The undersigned also authorizes Capitol Sales Company to provide complete information to banks and trade creditors for the purpose of their credit evaluation. If a personal credit report was requested, Capitol Sales Company will provide the name and address of the agency that furnished said report.

The Dealer account is subject to a late charge of 1.5% per month (18% per annum) on all past due amounts. Furthermore, I understand that any pending orders may not be shipped if my account is past due or is over the previously established credit line. I/we agree to pay all costs of collection on this account with litigation in and under the laws of the State of Minnesota. Should Capitol Sales Company grant credit, all decisions with respect to the extension or continuation shall be in the sole discretion of Capitol Sales Company. Notwithstanding, any provision in any agreement, the undersigned acknowledges that the extensions of credit may be changed or withdrawn at any time and if Capitol Sales Company ceased to extend credit, payment shall be, at Capitol Sales Company's option, any type of cash or secured transaction.

I/We have read and understand the terms and conditions and are applying for:

(check one or both): Net 30 days terms from the date of invoice Credit Line Requested: Amount _____
 Check By Phone

Print Name	Print Name	Print Name
Signature	Signature	Signature
Title	Title	Title
Date	Date	Date

Continued...



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GUARANTEE

I/We Individual name(s)

In consideration of any extension of credit by Capitol Sales company to the Dealer,

Dealer Name

and in consideration of the resale of goods from Capitol Sales Company Inc., I/we the undersigned hereby unconditionally and absolutely guarantee the due and punctual payment of all indebtedness, obligations, and liabilities of Dealer to Capitol Sales Company Inc. now or hereafter incurred (herein referred to as "Obligations"). If Dealer shall fail to pay any of the Obligations, Guarantor(s) will pay the same to Capitol Sales Company Inc. together with interest on any overdue Obligation at the annual rate of 18% or the highest lawful rate, whichever is less. The guarantee shall be interpreted and governed by the laws of Minnesota.

Capitol Sales Company Inc. shall have the right to extend the time of payment, modify terms and grant indulgences with respect to the indebtedness due or to become due from dealer, all without releasing me/us from the provisions of this Guarantee. Presentment, demand for payment, protest, notice of protest, notice of dishonor and of non-payment of the Obligations are hereby expressly waived by the Guarantors. If at any time Capitol Sales Company Inc. shall be required to repay any amount previously paid, by or on behalf of the Dealer in reduction of the Obligations by virtue of an order of any court, Guarantors unconditionally agree to pay Capitol Sales Company Inc. on demand a sum equal to the amount of such repayment, together with interest thereon from the date of repayment at the rate for overdue Obligations referred to above. Guarantors will pay all expenses, including, without limitations, reasonable attorney's fees and court costs, paid or incurred by Capitol Sales Company in enforcing the Guarantee.

_____ Print Name	_____ Print Name	_____ Print Name
_____ Signature	_____ Signature	_____ Signature
_____ Date	_____ Date	_____ Date
_____ Social Security #	_____ Social Security #	_____ Social Security #
_____ Home Address	_____ Home Address	_____ Home Address
_____ City, State, ZIP	_____ City, State, ZIP	_____ City, State, ZIP
_____ Home Phone	_____ Home Phone	_____ Home Phone

WITNESS

_____ Print Name	_____ Signature	_____ Date
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