



Branch Address:
5635 Union Pacific Avenue
Commerce, CA 90022-5136
Remit to Address:
P.O. Box 49107
San Jose, Ca 95161-9107

Bus: 323.721.3800
800.247.7826
Fax: 323.721.1563

Credit Application

Company Name: _____

Company Address: _____

Billing Address (if other than above): _____ Primary Contact: _____

Bus. Phone: _____ Bus. Fax: _____ Accounts Payable Contact: _____ Phone: _____

CleanSource Sales Representative: _____ Estimated Monthly Purchases: \$ _____ Credit Line Requested: \$ _____

Form of Business: Sole Proprietorship Partnership Corporation Date Business Started: _____

Proprietor(s) / Partner(s) / Officer(s) Information

1. _____
Name Residence Street Address / City, State, Zip

2. _____
Name Residence Street Address / City, State, Zip

Federal Identification / Social Security #: _____ Dun & Bradstreet #: _____

Type of business: _____

Corporate Information

State in Which Incorporated: _____ Date of Incorporation: _____

President: _____ Vice President: _____

Secretary: _____ Treasurer: _____

Bank Reference

Bank Name: _____ Bank Contact: _____ Contact Telephone: _____

Account Number: _____ Street Address / City, State, Zip: _____

Type of Account: Checking Savings

Open Account Credit has been established at the following:

1. _____
Firm Name Street Address / City, State, Zip

Business Phone: _____ Business Fax: _____ Account Number: _____

2. _____
Firm Name Street Address / City, State, Zip

Business Phone: _____ Business Fax: _____ Account Number: _____

3. _____
Firm Name Street Address / City, State, Zip

Business Phone: _____ Business Fax: _____ Account Number: _____

Please attach your most current financial statement. All information will be kept strictly confidential.

Will all purchases be subject to state sales tax? yes no If no, attach signed resale certificate.

In accordance with state law, all purchases will be charged the appropriate rate of tax unless a tax exemption certificate has been received.

Terms and Conditions of Sale

Accounts over 30 days past due are subject to a late payment charge of 1.5% per month or the maximum allowed by law. Purchaser agrees to pay all reasonable collection costs and attorney's fees necessary to collect past due amounts. This agreement is to be accepted and performed at San Jose, CA, unless otherwise specified; payment is due in San Jose, CA. The company reserves the right to increase, reduce, suspend or withdraw open account privileges at its sole discretion at any time without prior notification. If your account is inactive for 12 months, your account will be inactivated no notification will be sent. The above information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize CleanSource to investigate the references listed pertaining to my/our credit and financial responsibility.

Signature of Owner, Officer or Authorized Representative

Signature of Owner, Officer or Authorized Representative

Date

Date



California Resale Certificate

CUSTOMER #:

I HEREBY CERTIFY:

- 1. I hold valid seller's permit number:
2. I am engaged in the business of selling the following type of tangible personal property:
3. This certificate is for the purchase from CleanSource, Inc. of the item(s) I have listed in paragraph 5 below.
4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations...
5. Description of property to be purchased for resale:
6. I have read and understand the following: For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

NAME OF BUSINESS

SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTATIVE

PRINTED NAME OF PERSON SIGNING TITLE

ADDRESS OF BUSINESS

BUSINESS TELEPHONE DATE

Please disregard this form if you will not be selling our products. If you are reselling please fax it back to Attn: Accounts Receivables Fax: (408) 324-3292



Please fax or mail the completed credit application packet back to our corporate office for processing at:

CleanSource, Inc.
650 Brennan Street
San Jose, CA 95131-1204
Attn: Accounts Receivable
408-324-3292 (fax)

Customer #: _____

Sales Rep: _____

Direct Number: _____

A/R Credit Rep: _____

Direct Number: _____

Please Check One of The Following:

New Acct. _____ Update Acct. _____ Re-Activating Acct. _____

Terms:

_____ N30

_____ COD

_____ Credit Card (credit card authorization form required)