

A Division of *Lightel Technologies, Inc.*

2210 Lind Ave SW Suite 109 Renton, WA 98057 Tel: +1(425)430-4555 Fax: +1(425)968-9855

	For off	icial Use:	
Date			
	/	/	
Custome	r ID		

CREDIT APPLICATION FOR NET 30 TERMS

Legal Name of Company			All DBAs			
Federal Tax ID #	D & B Number		□S-Corp □LLC □Proprietorship	□C-Corp □Partnership □Other	Years in Business	
Estimated Annual Purchases			Requested Credit	Limit (subject to appro	val)	
Billing Address City, State, Zip Code			Shipping Address □Same as Billing City, State, Zip Code			
Title	Name		Email Addr		Address	
President/CEO/ Owner						
CFO/Controller/ Treasurer						
VP/ Partner						
NK REFERENCES						
Name of Bank		Name of Contact		Account Numb	per	
Street Address	et Address		City, State, Zip Code		Fax #(required)	
Name of Bank	Name of Contact			Account Numb	per	
Street Address		City, State, Zip Code		Phone #	Fax #(required)	
JOR TRADE REFERENCES				\ 	1	
Name of Company DBA		DBA		Name of Conta	Name of Contact	
Street Address		City, State, Zip Code		Phone #	Fax #(required)	
Name of Company DBA		DBA		Name of Contact		
Street Address		City, State, Zip Code		Phone #	Fax #(required)	
Name of Company	DBA			Name of Conta	Name of Contact	
Street Address		City, State, Zip Code		Phone #	Fax #(required)	
	□Please i	include requested Financia	l Statements with Cr	edit Application		
THORIZATION We hereby agree to pay in full within the presc	rihad tarm	s of sales. We further agree to	all reasonable collection	n costs attornouls foos	and court costs, should our compan	
placed for collection. The information herein is	for the pu	rpose of obtaining credit and is	warranted to be true.	We hereby authorize th	ne firm to whom this application is ma	
to investigate the references listed pertaining to our credit and financial responsibility. Printed Name		This information should be held in strict confidence. Signature				
Title			Date			
Resale Certificate Number	att	ach copy.			□Yes □No	

Date:
RE: Bank Reference
To Whom It May Concern:
We authorize Aleddra Led Lighting to make an inquiry into our credit standing. As an order is pending, please process the attached bank reference form in a timely manner. Thank you.
Bank Name:
Account Number:
Company Tax ID:
Sincerely,
Signature of Authorized Signer
Print Name
Company Name