

CREDIT APPLICATION / SALES TAX EXEMPTION FORM

619 E 19th St., Kansas City, MO 64108-1743 Phone: 816-842-9090 - Fax: 816-842-4121

Mail To:						
Business Name			Date			
Address	Business Telephone					
City, State, Zip	Fax Number					
Purchasing Agent or Manager's Name	E-mail Address		To Whom It May Concern: I (We) authorize any person having information as to			
Ship To:			•	release financial information		
Address	and credit reports to DC Tech Inc. We further authorize the release of financial information on credit reports on the Guarantors listed the reverse side of this form.					
City, State, Zip	Signed					
Owners, Partners, or Officers:		1				
Name	Title	Name Title		Title		
Street Address	Home Phone	Street Address	Home Phone			
City	S.S. Number	City		S.S. Number		
State, Zip	Date Of Birth	State, Zip		Date Of Birth		
Employed By	Employer's Phone No.	Employed By		Employer's Phone No.		
Personal Bank	Personal Bank Account No.	Personal Bank		Personal Bank Account No.		
Business Banking Reference:		■ Business Inform	ation.			
Bank Name	Account No.			hin Limited Dortnership		
		Type of Business: ☐ Corporation Partnership ☐ Limited Partnership ☐ Sole Proprietorship				
Address	Phone No.	N. D. C. C.				
City	Fax No.	Number of Locations: Year Business Started				
State, Zip	Bank Credit Line	Under present ownership since: State Incorporated				
Contact	Title					
PLEASE INCLUDE 4 REFERENCES IN SPACES PROVIDED ON SECOND PAGE FOR ALL EXCEPT CASH COD		Resale Tax Exemption Certificate:				
Please check one of the following:	I HEREBY CERTIFY: That I hold valid Retail Registration Number:					
COD CASH: Certified Check or Money C						
COD COMPANY CHECK: Customer C	issued pursuant to the Missouri Compensating Tax Law; that I am engaged in the business of selling:					
□ <i>VISA</i> □ <i>M/C</i> Card #						
Card #				herein which I shall purchase		
	from DC Tech Inc., 619 E 19th St., Kansas City, MO. 64108-1743, will be resold by me in the form of tangible personal property; provided, however,					
Name Of Cardholder	that in the event ar	that in the event any; of such property is used for any purpose other than				
Statement Address	retention, it is understood that I am required by Missouri Sales and Compensating Tax Law to report and pay tax, measured by the purchase price of such property. Description of property purchased:					
City S						
Phone						
	Signed					
Open Account - Requested Credit Line Send Financial Statement		 Date				
Sena Financial Statement		Date				



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Trade References:					
Company Name	Account #				
0					
Address	Phone #				
City, State, Zip	Fax #				
Company Name	Account #				
2					
Address	Phone #				
Address	Phone #				
City, State, Zip	Fax #				
Company Name	Account #				
 ❸					
Address	Phone #				
City, State, Zip	Fax #				
Oity, State, Zip	I ax #				
Company Name	Account #				
4					
Address	Phone #				
City, State, Zip	Fax #				
Agreement:					
 The Undersigned Agrees: That any and all discrepancies or deficiencies must be made in writing within 30 days of receipt, with proof of mailing to DC Tech Inc.; failure to do so, shall be deemed a waiver of any and all claims that may arise. To be responsible for payment of all invoices within thirty (30) days of the date of the invoices. 		6. You agree to pay us all reasonable costs we incur to collect any delinquent balance due or realize on any security interest taken by us. This includes reasonable attorney's fees, if referred to an attorney who is not a salaried employee of ours. This provision shall also apply if you file a petition or any other claim for relief under and bankruptcy rule or law of the United States, or if such petition or claim for relief is filed against you by another in bankruptcy court.			
3. The undersigned hereby certifies that the above information's true and correct. Invoices unpaid after thirty one (31) days from the date of invoice the undersigned agrees to pay and authorizes you to bill my account Interest computed at 2% per month (24% per annum) on any past due		7.	The undersigned individuals do jointly and severally guarantee payment to DC Tech Inc., of the full amount of all sums owed by:		
 amount or the maximum prevailing rate allowable under the law of state governing the transactions. contemplated by this credit application. 4. That any dispute arising from transaction arising with DC Tech Inc., shall be governed according to the laws that prevail in the state of Missouri. The undersigned further agrees to be bound by such laws and the only venue for resolving such; shall be in the County of Jackson, state of Missouri. 			(name of applicant Business) to DC Tech Inc., This guarantee of payment is absolute; unconditional and irrevocable and is made for and in consideration of the agreement of DC Tech Inc., to extend credit to:		
			(name of applicant business) The undersigned agrees to pay, in addition to said balance, all costs of collection including reasonable attorney's fees and court costs.		
 Notice that a UCC filing may be made by DC Tech Inc., at its sole discretion, based on circumstances of the individual sale contemplated by the parties. 		Date:			
		Signed ————————————————————————————————————			
Notary Stamp/Signature:		Please Print:			
		Na	Name		
		Title			
			Legal Company Name ————————————————————————————————————		
		DBA (if applicable)			