



APPLICATION FOR OPEN ACCOUNT

(Please Print or Type)

Company Name: _____ **Contact:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Check One: Proprietorship ____ Partnership ____ Corporation ____ Limited Liability Company ____

Telephone: _____ **Fax:** _____ **Type of Business** _____

Email Address: _____

Owners/Officers: _____ **Years in Business:** _____

No. of Employees _____ **Est. Annual sales** _____ **Sales Area** _____

Federal Tax ID # _____

ACCOUNTS PAYABLE CONTACT: _____

Accounts Payable Telephone: _____ **Accounts Payable Email:** _____

Bank Name: _____ **Bank Contact:** _____

Bank Telephone: _____ **Bank Address:** _____

Type of Account(s): _____ **Account Number(s):** _____

LIST AT LEAST THREE COMPANIES FROM WHICH YOU CURRENTLY PURCHASE ON OPEN ACCOUNT
(Please provide complete information for each company listed)

Company Name: _____ **Contact:** _____ **Email:** _____

Company Name: _____ **Contact:** _____ **Email:** _____

Company Name: _____ **Contact:** _____ **Email:** _____

Company Name: _____ **Contact:** _____ **Email:** _____

I authorize the above name bank(s) and credit references to release information on my account. I certify that the above information is complete and accurate and agree to make payments on my account according to specified terms.

Authorized Signature: _____ **Date:** _____

Please return completed form to:
Fishpond
275 Kalamath Street , Denver , CO 80223
Email: orders@fishpondusa.com

CREDIT APPLICATION

Has the firm or any of its principles ever been Bankrupt? Yes No

If Yes, explain _____

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principles listed.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed and agrees to pay a service charge of 4% per month on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

(Name of Business)

(Print Name) _____
(Title) _____
(Signature)

(Print Name) _____
(Title) _____
(Signature)

PERSONAL GUARANTEE

(Fill in name of company granting credit)

In consideration for _____ extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to _____ by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between _____ and the business. _____ shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by _____.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by _____. Said notice shall specify the date on which this guaranty is to be terminated, said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date _____ Name: _____
(Name of person guaranteeing payment, NO TITLE)

Home address _____

Home Phone # _____

Signature of person guaranteeing payment _____

Name of Business whose account is guaranteed _____

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