ENIPPON CARBIDE INDUSTRIES (USA) INC.

13856 Bettencourt Street, Cerritos, CA 90703 Phone: (800) 821-4264 / Fax: (888) 330-7119

APPLICATION FOR CREDIT

Please fill out information below and mail or fax it to the above.

Name of Applicant:	
☐ Corporation ☐ Sole Proprietorship	○ □ Partnership □ Other
Date established:	<u> </u>
Address:	City:
	State: Zip Code:
Telephone Number:	Email Address:
Type of Business:	
List Owners, Partners or Corporate Principals	s, if applicable:
Name: Addres	ss:
Name: Address	s:
Are you listed by Dunn & Bradstreet (D&ICREDIT TRADE REFERENCE:	B)? 🗆 Yes 🗆 No D&B No
	purchases. (800) Toll free numbers will not be accepted.
Name:	Email:
	City:
	State: Zip Code:
Telephone Number:	— Fax Number:
Product Purchased:	

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Name:			Email:	
Address:	(City:		
	s	State:		Zip Code:
Telephone Numbe	er: ———		Fax Number:	
Product Purchase	ed:			
NI				
Address:	(City:		
	S			Zip Code:
	er: ————		Fax Number:	
Product Purchase	ed:			
		======	========	=======================================
Name:			Email:	
Address:	(City:		
	S	State:		Zip Code:
Telephone Number	er:		Fax Number:	
Product Purchase	ed:			
BANK REFEREN	CE:			
Name:				
Address:		City:		
		•	_	Zip Code:
	ər: ———		Acct Number	
CREDIT LINE RE				
CREDIT LINE RE	QUESTED.			
Our terms are net	30 days after shipment. No sh	ipment	s will be made	e to any account past due.
	□ Up to \$1,000 □ \$2,5	500 — \$5	5,000 🗆 \$7,	500 – \$10,000
	□ \$1,001 - \$2,500 □ \$5,0	01 – \$7	7,500 □ \$ __	

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Current financial statements must be submitted with requests of credit line greater than \$10,000.

THE UNDER AUTHORIZED OFFICER CERTIFIES THAT THE ABOVE STATEMENTS ARE CORRECT.

NIPPON CARBIDE INDUSTRIES (USA) INC. IS HEREBY AUTHORIZED TO CONTACT ANY AND ALL

OF THE PRECEEDING FIRMS LISTED AS REFERENCES REGARDING

APPLICANT'S CREDIT.

Signature of Authorized Officer

Title

CALIFORNIA SALES AND USE TAX RULES AND REGULATIONS RESALE CERTIFICATES

Date

To Our Customers:

Printed Name

In compliance with the California Sales and Use Tax Law, we customarily obtain from each of our customers a signed Resale Certificate reflecting the customer's California sales tax permit number to evidence that the customer has purchased the merchandise for resale.

Our good faith will be questioned if we have knowledge of facts which give rise to a reasonable inference that our customer does not intend to resell the merchandise, such as, knowledge that a purchaser of particular merchandise is not engaged in the business of selling that kind of merchandise.

Please complete the attached Resale Certificate and return it to us at once.

Thank you for your cooperation.

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RESALE CERTIFICATE

Name:				
Address:	_ City:			
	_ State:	Zip	Code:	
Telephone Number: ————————————————————————————————————	_	Fax		
I HEREBY CERTIFY:				
That I hold va issued pursuant to the California Sales an selling		seller's x Law; that I am	permit n engaged in the b	number usiness of :
that the tangible personal property description (USA) INC. will property; provided, however, that in the even than retention, demonstration or display whit is understood that I am required by the tax, measured by the purchase price of surpose Description of property to be purchase.	l be resolent any of nile holding California och proper	d by me in the such property i g it for sale in th Sales and Use ty or other authe	e form of tangible s used for any purpe regular course of a Tax Law to report crized amount.	personal pose other business,
	aseu IIOIII	NCI (IIII III I DO	^).	
☐ Reflective Sheeting				
☐ Screening Inks				
☐ Non-Reflective Vinyl				
□ Other:				
Signature of Purchaser or Authorized Age	nt		.	
Printed or Typed Name of Purchaser or A	uthorized .	 Agent	Date	