

6340 Artesia Blvd. Buena Park, CA 90620 Phone: 714-523-1000 Fax: 714-523-2100

www.alcousa.com

### **CREDIT APPLICATION**

page 1 of

INSTRUCTIONS: Please type or print, supplying all information requested. Signature of owner, partner, or corporate officer is required. Attach resale card for tax exempt purchases.

7.0	BUSINESS NAME (APPLICAN	Γ)			AGE OF BUSINESS
ESS	ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)
BUSINESS	PHONE	FAX	FEI	DERAL TAX ID:	
BI	EMAIL ADDRESS	I	WEBSITE		
			COPPODATION	ESTIMATED MON	THLY LINE OF CREDIT
	PROPRIETORSH	IP PARTNERSHIP	CORPORATION	<u> </u>	HOME PHONE
OWNERSHIP	ADDRESS (STREET)	(CITY)	(STATE)	(ZIP CODE)	SOCIAL SECURITY NO.
WN	2nd PRINCIPAL'S NAME		TITLE		HOME PHONE
0	ADDRESS (STREET)	(CITY)	(STATE)	(ZIP CODE)	SOCIAL SECURITY NO.
N K	BANK	ADDRESS (STREET)	(CITY)	(S	STATE) (ZIP CODE)
BANK	CONTACT	PHONE		CHECKING ACC	Г. NO.
applic indeb	cant (*Debtor*), the undersign tedness of Debtor for (1) go rmed for Debtor by Creditor,	nereafter granted by Alco Prin ned hereby unconditionally an oods sold or consigned to, we together with a reasonable ser- uding court costs and reasonab	d personally guarantees to ork-in-process identified f vice charge (1% per month	Creditor full pay or, Debtor by Cr	ment when due of any reditor or (2) services
guara or reg obliga	nty shall be a continuing guagistered mail, to Creditor to e	forceable against the undersign ranty and shall remain in full for the stend no further credit on the sting at the time such notice is the with Creditor by Debtor.	orce and effect until under security of this guaranty. S	signed gives writuch notice shall b	ten notice, by certified be ineffective as to any
to inv	restigate applicants credit wo	that all the information provious rthiness as may be needed. The agents to release all necessary	e undersigned authorizes a	all banking institu	itions, credit reporting
Inten	ding to be legally bound he	reby,			
	SIGNATURE		TITLE		DATE
	SIGNATURE		TITLE		DATE



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page 2 of 4

INSTRUCTIONS: Please type or print, supplying all information requested. Signature of owner, partner, or corporate officer is required. Attach resale card for tax exempt purchases.

	Trade Reference From:			
			Company Name	
	BUSINESS NAME (APPLICANT)			
REF 1	ADDRESS (STREET)			
DE R	(CITY)	(STATE)	(ZIP CODE)	
TRADE	CONTACT			
	PHONE	FAX		
	BUSINESS NAME (APPLICANT)			
REF 2	ADDRESS (STREET)			
E R	(CITY)	(STATE)	(ZIP CODE)	
TRADE	CONTACT			
	PHONE	FAX		
	BUSINESS NAME (APPLICANT)			
REF 3	ADDRESS (STREET)			
DE R	(CITY)	(STATE)	(ZIP CODE)	
TRADE	CONTACT			
$\mathbf{I}$	PHONE	FAX		
	BUSINESS NAME (APPLICANT)			
4				
KEF	ADDRESS (STREET)			
E F	(CITY)	(STATE)	(ZIP CODE)	
TRADE REF	CONTACT			
	PHONE	FAX		

# **BANK CREDIT RATING**

page 3 of 4

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### Attention future customer of Alco Printing & Packaging:

Due to a recent policy change in the banking industry, we will now require the following information, complete with signature before your account can be set up by our company.

Name of Bar	nk											
Address												
Phone No.						Fax N	lo.					
Contact												
Account Nar	ne											
Account No.												
I hereby give for the purpor							kagin	ıg, to ı	utilize	e the a	above informati	ion
Signature							_	Date				
		Do no	t wri	te be	low th	is line	- for	BAN	K On	 ily!		
Please provid	e the fo	llowi	ng inf	orma	tion w	ith reg	ards	to				
			(Coı	npan	y Nam	ne). Th	ank y	ou for	your	attent	tion to this mat	ter.
DATE ACCC	OUNT C	)PEN	ED: _									
RATING:	LO	W			MEI	DIUM			F	HIGH		
	1	2	3	4	5	6	7	8	9	10		





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COMPANY NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
I HEREBY CERTIFY that I hold valid se issued pursuant to the Sales and Use		
I ALSO HEREBY CERTIFY that the from Alco Printing & Packaging, we provided, however, that in the even retention, demonstration, or display we is understood that I am required by S the purchase price of such property. Description to the following:	will be re-sold by me in the tany such property is used while holding it for sale in the ales and Use Tax Law to rep	e form of tangible property; I for any purpose other than e regular course of business, it ort and pay Tax, measured by
Bags, Blades, Boxes, Brushes, Bub Machines, Carton Sizers, Dessicants, Heat Sealers, Humidity Indicating Supplies, Knives, Labels, Label Di Packaging Equipment, Packing Pear Tubing, Printing Plates, Printing Di Security Seals, Staple Removers, St Shrink Tunnels, Strappings, Strappin Tags, Tape Dispensers, Tapes, Bag Se used in marking, packaging and shipp	Drop (N) Tell, Foam Wrap, Cards, Industrial Sprays, It ispensers, Markers, Oilboar nuts, Paper (Kraft Wrapping les, Ribbons-Thermal Transfaples, Staplers, Stencils, Steng Tools, Stretch Film, Stretch Ealing Tape, Ties, Tip (N) Telephone	Glue & Gluers, Hand Printers, nk Solvents, Inks, Janitorial ds, Packing List Envelopes, ), Placards, Poly Bags, Poly fer, Rollers, Safety Supplies, encil Machines, Shrink Film, ch Film Wrapping Machines,
Print Name of Purchaser or Author	ized Purchasing Agent and	Title
Signature		
Date:	Phone: _	

#### Authorization to pull the personal credit Report

The undersigned represents that all information provided with this application is true and correct, and here by authorizes Alco Printing & Packaging, and / or Sunbridge Leasing Corporation and/or its affiliates to obtain from third parties information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s), as principal of and/or guarantor for the applicant, here by authorizes Alco Printing & Packaging, and / or Sunbridge Leasing Corporation, its designees, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. I authorize all deposit, borrowing, financial and trade information to be released to Alco Industries, inc., and / or Sunbridge Leasing Corporation and/or its assigns by Telephone or Fax. A photo copy of this authorization shall be valid as the original.

Print Name			
Signature		Date	
Street Address:			
City:	State:	Zip:	
Social Security Number:			