

OMNIPrint, Inc. Credit Application

This form requires a signature.

Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Accounts Payable Contact: _____ Telephone # _____

Fax # _____ E-Mail Address: _____

____ Corporation ____ Partnership ____ Proprietorship

Years in Present Business: _____ Dunn & Bradstreet # _____

Bank Name: _____

Bank Address: _____

City: _____ State: _____ ZIP: _____

Bank Telephone # _____ Bank Fax # _____

Bank Contact Name: _____ Bank Account # _____

I authorize the release of credit and banking information to OMNIPrint, Inc.

Authorized Signature of Company Owner or Corporate Officer

Title/Position

Date

Printed Name

Social Security #

Mail or Fax with Signature and Trade References To:

OMNIPrint, Inc.
1923 East Deere Ave
Santa Ana, CA 92705
FAX: 949-833-0040

OMNIPrint, Inc. Credit Application

TRADE REFERENCES (Major Suppliers)

Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Accounts Payable Contact: _____ Telephone # _____

Fax # _____ E-Mail Address: _____



Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Accounts Payable Contact: _____ Telephone # _____

Fax # _____ E-Mail Address: _____



Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Accounts Payable Contact: _____ Telephone # _____

Fax # _____ E-Mail Address: _____

If you prefer, you may attach your own trade/credit reference list and fax it along with the first page of this credit application.