

A Division of *Lightel Technologies, Inc.*

2210 Lind Ave SW Suite 109 Renton, WA 98057 Tel: +1(425)430-4555 Fax: +1(425)968-9855

F	For official Use:				
Date					
	/	/			
Customer	·ID				

CREDIT APPLICATION FOR NET 30 TERMS

Legal Name of Company			All DBAs	All DBAs			
Federal Tax ID #	D & B Number		□S-Corp □LLC □Proprietorship	□C-Corp □Partnership □Other	□Partnership		
Estimated Annual Purchases				mit (subject to approv	val)		
Billing Address		Shipping Address □Same as Billing					
City State 7in Code			Ch. Ch. 7's Co.d.				
City, State, Zip Code			City, State, Zip Code				
Phone #	Fax#		Billing Contact	Billing Contact E-mail Address			
Title	Name			Email Address			
President/CEO/ Owner							
CFO/Controller/ Treasurer							
VP/ Partner							
NK REFERENCES							
Name of Bank				Account Numb	Account Number		
Street Address	ddress		City, State, Zip Code		Fax #(required)		
Name of Bank	Name of Contact			Account Number			
Street Address		City, State, Zip Code		Phone #	Fax #(required)		
AJOR TRADE REFERENCES							
Name of Company DBA		DBA		Name of Conta	act		
Street Address		City, State, Zip Code		Phone #	Fax #(required)		
Name of Company DBA		DBA		Name of Contact			
Street Address		City, State, Zip Code		Phone #	Fax #(required)		
Name of Company		DBA		Name of Conta	Name of Contact		
Street Address		City, State, Zip Code		Phone #	Fax #(required)		
L	□Please	 include requested Financia	l Statements with Cred	dit Application			
	herein is for the pu	rpose of obtaining credit and is	warranted to be true. W	e hereby authorize th	, and court costs, should our company be firm to whom this application is madence.		
Title			Date				
Resale Certificate Number		ach copy.	Not you?		□Yes □No		
Are there any suits, judgments, tax deficiencies or other claims pending agains Have you ever compromised with creditors or been through bankruptcy?			ist your		□Yes □No □Yes □No		

Date:
RE: Bank Reference
To Whom It May Concern:
We authorize Aleddra Led Lighting to make an inquiry into our credit standing. As an order is pending, please process the attached bank reference form in a timely manner. Thank you.
Bank Name:
Account Number:
Company Tax ID:
Sincerely,
Signature of Authorized Signer
Print Name
Company Name