



# Dealer Credit Application

ALL INFORMATION SUBMITTED WILL BE KEPT IN STRICT CONFIDENCE  
PLEASE NOTE: All applications must be accompanied by a minimum  
order of \$5000 in order to qualify for processing.  
FAX#: 1.888.222.0559

i<sup>3</sup> International Sales Representative: \_\_\_\_\_ Rep Number: \_\_\_\_\_

## CONTACT INFORMATION

Legal Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Operating Name (if any): \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Country: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax#: \_\_\_\_\_ Website: \_\_\_\_\_

Date Business Established: \_\_\_\_\_ Incorporation Date: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ List of Affiliated Companies: \_\_\_\_\_

## NAMES OF PRINCIPALS/OFFICERS OF THE COMPANY

President: \_\_\_\_\_ Vice President: \_\_\_\_\_

Secretary: \_\_\_\_\_ Treasurer: \_\_\_\_\_

## BANK INFORMATION (INFORMATION WILL ASSIST US IN ESTABLISHING A LINE OF CREDIT)

Bank: \_\_\_\_\_ Account: \_\_\_\_\_

Branch Address: \_\_\_\_\_

## MAJOR SUPPLIERS

	NAME & ACCOUNT NO#	ADDRESS	POSTAL CODE	TELEPHONE
1				
2				
3				

I/WE WARRANT THE INFORMATION SHOWN HERE TO BE TRUE. I/WE DO HEREBY AUTHORIZE i<sup>3</sup> INTERNATIONAL, INC. TO VERIFY ALL OR PART OF THE ABOVE LISTED CONFIDENTIAL DISCLOSURES AND TO VERIFY THE CREDITS STATUS OF EXISTING LINES OF CREDIT AS LISTED ON THIS APPLICATION. THIS APPLICATION IS ALSO MY AUTHORIZATION TO CONTACT THE ABOVE NAMED BANK NOW AND AT ANY FUTURE DATE FOR FULL DISCLOSURE OF CURRENT CREDIT STATUS. FURTHER, I/WE AGREE TO PAY ACCORDING TO TERMS PRINTED ON i<sup>3</sup> INTERNATIONAL INC. INVOICES FOR ANY PURCHASE MADE INCLUDING DISCOUNTS, NET PRICE, AND LATE CHARGES.

Value of First Order: \_\_\_\_\_ Annual Purchase (Est.): \_\_\_\_\_

Credit Limit Request: \_\_\_\_\_ D&B Number: \_\_\_\_\_

Financial Statement Available: Yes  No

Business Registration #: \_\_\_\_\_ P.S.T (or State Tax Registration #): \_\_\_\_\_

Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_