



Credit Application

Date: \_\_\_\_\_ Credit Limit Requested: \_\_\_\_\_

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Form of Business Ownership: C-Corp  LLC  S-Corp  Sole Proprietor

State of Incorporation: \_\_\_\_\_ Federal Tax ID: \_\_\_\_\_  
*Note: if other than C-Corp, Form W-9 must be attached*

DUNS Number: \_\_\_\_\_ D&B Rating: \_\_\_\_\_ Years in Business: \_\_\_\_\_

**Authorized Company Contacts:**

Owner/President/CEO: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Controller / CFO: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Purchasing: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Accounts Payable: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Ship to / Receiving Address \_\_\_\_\_ Phone: \_\_\_\_\_

**Trade References:**

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Email: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Email: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Email: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Email: \_\_\_\_\_

**Bank References:**

Bank Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Email: \_\_\_\_\_

Are there pending lawsuits or judgements against the applicant company? \_\_\_\_\_ If Yes, attach explanation

Has the applicant company or any of its predecessor companies ever entered into any form of bankruptcy proceedings? \_\_\_\_\_ If yes, attach explanation

Please attach a copy of the applicant's latest balance sheet and income statement to this form.

The undersigned authorizes inquiry as to credit information with the above referenced sources and further authorizes these sources to respond to inquiries made by Synapse Wireless, Inc. We further acknowledge that credit privileges, if granted, may be withdrawn at any time by Synapse Wireless, Inc.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date