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20160 Paseo Del Prado, Suite A. Walnut, CA 91789  
Tel: 909-598-3320 Fax: 909-595-1254  
www.pcusacorp.com

**Subject : Account Set-Up**

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**Dear Applicant,**

**Thank you for your interest in our products. In order to facilitate the expeditious handling of your credit applications to PCUSA Corp. please include the following items with your application.**

- 1. Credit Application**
- 2. Bank Authorization Form**
- 3. Resale Certificate**
- 4. Copy of Voided Company Check**

**As soon as I have the above, we can proceed with your credit application. I wait for your prompt reply. Thank You.**

**Sincerely,**

**Credit Department**



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# Credit Application

Company Name: \_\_\_\_\_  
 DBA: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 Shipping Address: \_\_\_\_\_  
 Company Website: \_\_\_\_\_  
 Owner / President: \_\_\_\_\_  
 Social Security #: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Accounts Payable Contact: \_\_\_\_\_  
 Authorized Purchaser(s): \_\_\_\_\_  
 State Resale #: \_\_\_\_\_  
 Type of Business: \_\_\_\_\_  
 Date/Year Established: \_\_\_\_\_  
 Legal Structure:  Sole Proprietorship  Limited Partnership  
 Company Facility:  Owned  Leased \_\_\_(Yr) \_\_\_(Mo)

**BANK REFERENCES**

1. Bank Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 2. Bank Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Address: \_\_\_\_\_

**TRADE REFERENCES**

1. Company Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 2. Company Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 3. Company Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Address: \_\_\_\_\_

*Sales Rep.* \_\_\_\_\_

Phone #: \_\_\_\_\_  
 Fax #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Home Phone #: \_\_\_\_\_  
 Driver License's #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Federal Tax ID #: \_\_\_\_\_  
 Number of Employees: \_\_\_\_\_  
 Annual Sales Volume: \$ \_\_\_\_\_  
 General Partnership  Corporation  
 Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contact: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

All Statements made herein are true and accurate to the best of our knowledge. We hereby agree to pay by the terms of sale listed on each PCUSA invoice. PCUSA reserves the right to charge a finance fee of 24% per annual or part thereof for any invoice that is past due. Each return check will be charged \$25.00. We further agree to pay all the collection fees, reasonable attorney fees, court cost and expenses incurred by PCUSA to collect balances due.

Authorization is hereby given to release information to PCUSA regarding our banking and credit history for the purpose of establishing credit. We hereby indemnify PCUSA and its agents from any liability resulting from their credit survey. All information shall be held strictly confidential.

Guarantor Name: \_\_\_\_\_  
 Title: \_\_\_\_\_

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



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**Bank Authorization Form**  
*Sales Rep.*

Company Name: \_\_\_\_\_  
 Bank Name: \_\_\_\_\_  
 Branch: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Account #: \_\_\_\_\_

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

I hereby authorize the release of banking information to PCUSA for the confirmation of my banking status. Your prompt attention to this matter will be greatly appreciated. This authorization will continue otherwise notified in writing.

Authorized By: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR BANK USE ONLY:**

Dear Bank Officer,

The above captioned company has applied for an open line of credit with PCUSA. We appreciate your assistance in providing the following information:

Type of Account: \_\_\_\_\_  
 Account Open Date: \_\_\_\_\_  
 Average Monthly Balance (For the last 6 months): \_\_\_\_\_  
 Lowest Balance: \_\_\_\_\_  
 Currently Balance: \_\_\_\_\_  
 No. of Non-Sufficient Check: \_\_\_\_\_  
 Credit Line with Your Bank: Yes No Secured: Yes No  
 Open Date: \_\_\_\_\_ Credit Limit: \_\_\_\_\_  
 Current Balance: \_\_\_\_\_ Maturity Date: \_\_\_\_\_  
 Account Comments: Excellent Good Fair Limited

Prepared By: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_

Please Fax Back To PCUSA at 909-595-1254 Attn: Credit Dept. Thank

you,  
 Credit Dept.



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**Resale Certificate**  
*Sales Rep.*

(hereafter reseller)

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

I/we hereby certify that I/we am/are a holder of Seller's Permit # \_\_\_\_\_

issued pursuant to the Sales and Use Tax Law governed by the State of I \_\_\_\_\_

am engaged in the business of reselling the following merchandise: \_\_\_\_\_

The above tangible merchandise described herein, which I/we shall purchase from PCUSA, will be resold by the reseller in the form of tangible merchandise and won't be used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay for the Sales Tax, measured by the purchase price of such property or other authorized amount.

Description of merchandise to be purchased: \_\_\_\_\_

Authorized By: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_