

Dear Customer,

Thank you for your interest in POS Supply Solutions quality products.

If your order is of an urgent nature, you may wish to pay by Credit Card as it can take up to 1-2 weeks for credit approval. If you wish to pay by credit card, please call Customer Support at 888-431-5800. Your account will not be charged until your order has been shipped.

POS Supply Solutions offers **Net 30 Day Payment Terms** to approved accounts. If you are requesting Net 30 Day Credit Terms, please complete the Trade Reference section of the application. You may submit a Corporate Trade Reference Sheet; however, you must sign and return the application at the bottom of the form that authorizes us to request credit information from your vendors and banking establishment.

Upon response from your references and review of information, you will be notified when your account has been approved. Please allow us adequate time to collect and review this information.

***A fully completed Credit Application will expedite the set up of your new account.
Incomplete applications can lead to a delay in processing.***

POS Supply Solutions is taking a step to making a difference on the environment by offering environmentally friendly e-billing. We are always striving for new ways to minimize our environmental impact while maintaining superior customer service. We will email or fax your invoice to you. Please provide us with your A/P email or fax and together we can make a difference towards a greener world!

Please return your application via email to accounting@possupply.com

Confidential Business Credit Application for Net 30 Day Payment Terms

Company Information:

Company Name:			Date Incorporated:		
Type of Ownership: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Government <input type="checkbox"/> Non-Profit <input type="checkbox"/> Other					
Billing Street Address:			Federal Tax ID or VAT #:		
City:	State:	Country:	Postal / Zip Code:		
Telephone:		Fax:		Credit Amount Requested:	
Parent Company (If Applicable):					
Physical Street Address (if different from above):					
City:	State:	Country:	Postal / Zip Code:		

Corporate Officers:

President/CEO:	Chief Financial Officer:
Treasurer:	Secretary:

Corporate Contacts:

Purchasing Contact:	Accounts Payable Contact:
Purchasing Telephone:	Accounts Payable Telephone:
Purchasing Email Address:	Accounts Payable Email Address:
Purchasing Fax:	Accounts Payable Fax:

- ✓ If you choose to attach a trade reference sheet, please be certain that it contains all requested information and that all information is current.
- ✓ Also sign and return this page so that we may have authorization to contact your vendors and banking establishment.

Trade References:

1- Vendor Name:	Account#:	
Email:	Contact Name:	Telephone Number:
2- Vendor Name:	Account#:	
Email:	Contact Name:	Telephone Number:
3- Vendor Name:	Account#:	
Email:	Contact Name:	Telephone Number:
4- Vendor Name:	Account#:	
Email:	Contact Name:	Telephone Number:

Bank Reference and Financial Information:

Bank Name:	Telephone Number:
Account Number:	Fax Number:
Bank Contact Name:	Contact Telephone Number:

THIS IS NOT A PERSONAL GUARANTEE:

I hereby represent that I am authorized to submit this application on behalf of the company named above, and that the information provided is for the purpose of obtaining credit and is warranted to be true. In signing this document by hand or an electronic signature, I/we hereby authorize POS Supply Solutions to contact the bank and trade references listed pertaining to my/our credit and financial responsibility. It is agreed and understood that all necessary collection and attorneys fees and costs and interest as allowed by law may be charged to debtor in the event of default or failure to pay for goods sold and delivered. On behalf of the company, I/we hereby consent in any legal action or proceeding to enforce payment for goods or services, to the exclusive jurisdiction of the courts of the state of Massachusetts, US Courts for the District of Massachusetts, and appellate courts for any thereof. The laws of the state of Massachusetts shall apply, excluding its conflicts of law rules. I/we further represent that the company applying for credit has the financial ability and willingness to pay all invoices within established terms.

Signed: _____ Date: _____
(Company Officer)

Print Name: _____

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