

W. H. WOLFF GOLF GLOVES

6709 LA TIJERA BLVD. #833, LOS ANGELES, CA 90045

(800) 329-7929 FAX: (323) 375-1450



Credit Application

The undersigned company is applying for credit with W. H. Wolff and agrees to abide by the standard terms and conditions of W. H. Wolff as printed on the reverse side.

Company name _____

DBA (if different) _____

Contact person _____

Address _____

Phone _____

Fax _____

Federal tax ID or Social Security number. _____

Type of business N/A _____

No. of employees N/A _____

Date business established _____

Types of products you will purchase GOLF GLOVES _____

Amount of credit requested \$ ONE OPEN INVOICE _____

Are you a:

CORPORATION

State of incorporation _____

Names, titles, and addresses of your three chief corporate officers

Name and address of your resident agent

PARTNERSHIP

Names and addresses of the partners

SOLE PROPRIETORSHIP

Are you sales tax exempt?

Yes

No

Have you ever had credit with us before?

Yes

No

If yes, under what name?

Authorized purchasers

Purchase order required?

Yes

No

TRADE REFERENCES

Reference #1

Name _____

Address _____

Phone _____

Reference #2

Name _____

Address _____

Phone _____

Reference #3

Name _____

Address _____

Phone _____

BANK REFERENCES

Bank#1

Account # _____

Phone _____

Contact person _____

Name of bank _____

Address _____

Bank#2

Account # _____

Phone _____

Contact person _____

Name of bank _____

Address _____

I represent that the above information is true and is given to induce W. H. Wolff to extend credit to the applicant. My company and I authorize W. H. Wolff to make such credit investigation as W. H. Wolff sees fit, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to W. H. Wolff any and all information concerning the financial and credit history of my company and myself.

I have read the terms and conditions stated below and agree to all of these terms and conditions.

Authorized signature: _____

Printed name: _____

Title: _____

Date: _____

GENERAL TERMS AND CONDITIONS AND PERSONAL GUARANTEE

1. Bills are sent on the day your order of gloves is shipped. Terms are Net 30, and you may take the 2% discount as indicated on the bill if you pay the invoice by the 10 days from the invoice date.
2. All bills become payable in full on the 11th day following the invoice date and if not paid by the end of 30 days are considered past due.
3. A service charge of 1.5% per month will be added to all amounts billed if not paid by the end of 30 days.
4. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.
5. **PERSONAL GUARANTEE:** If the credit customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased on credit by the corporation.