



Dear Customer. In order to provide you with credit approvals for a term sales, certain information on your company will be requested. Please take a moment to fill out Credit Application Forms along with your purchase order.

Please complete the form below and email it back to support@egpro.com or send to: EG-PRO, 275 W. 39th Street, 8th Fl., New York, NY 10018 / 212-221-0221

COMPANY INFORMATION			
COMPANY NAME /FULL LEGAL NAME (hereinafter "Applicant")		TRADE NAME, IF DIFFERENT FROM LEGAL NAME	
DUNS#		FEIN#	
ADDRESS: (STREET) (CITY) (STATE) (ZIP)			
PHONE NUMBER	FAX NUMBER	EMAIL	FISCAL YEAR-END DATE
BUSINESS ENTITY CORP.() PARTNERSHIP () LLC ()		EST. YEAR & STATE	FEDERAL TAX ID NO.
NATURE OF THE BUSINESS:		MAJOR AUDIENCE:	
ASI#:	SAGE#	PPAI#	SPORTS INC# NBS#
FIRST PRINCIPAL - NAME	DATE OF BIRTH	PLACE OF BIRTH	SOCIAL SECURITY NUMBER
TITLE	OWNERSHIP (%) %	HOME PHONE NUMBER	CELL PHONE NUMBER
HOME ADDRESS (STREET) (CITY) (STATE) (ZIP)			
ACCOUNTS PAYABLE	PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS
BANK NAME FOR BUSINESS ACCT.	ACCOUNT NO.	PHONE NUMBER	CONTACT PERSON
BANK ADDRESS (STREET) (CITY) (STATE) (ZIP)			
BANK CONTACT	PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS
CPA FIRM NAME		PHONE NUMBER	CONTACT PERSON
CPA ADDRESS (STREET) (CITY) (STATE) (ZIP)			
AMOUNT OF CREDIT LINE REQUESTED:		TOP SELLERS:	
USD			

Signature:

Name:

Title:

Date:

1. PERSONAL LIABILITY: Owner, Co-owner, shareholder and/or Officer in their individual capacity does, by his or her execution, agree to personally undertake and assume all obligations incurred by the Applicant pursuant to this Credit Agreement and agree to be personally liable and bound to pay the creditor as defined above (including any successors and /or assigns), upon demand, any amount which are due on the Applicant's account and which the applicant has failed to pay.

2. In connection with this application, the undersigned hereby certifies that the above statements, which are submitted for the purpose of obtaining credit, are true, correct and complete. It is further agreed that Jettco International Inc. will promptly be notified of any material changes in the above information.



Dear Customer. In order to provide you with credit approvals for a term sales, our factor may need certain information on your company. Please take a moment to fill out this Customer Account Information Sheet or provide us with your own reference sheet along with your purchase order.

Please complete the form below and email it back to support@egpro.com or send to: EG-PRO, 275 W. 39th Street, 8th Fl., New York, NY 10018 / 212-221-0221

CREDIT REFERENCES

SUPPLIER (1) - NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (2) - NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (3) - NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (4) - NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (5) - NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (6) - NAME		ADDRESS	
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	

Initial:

1. PERSONAL LIABILITY: Owner, Co-owner, shareholder and/or Officer in their individual capacity does, by his or her execution, agree to personally undertake and assume all obligations incurred by the Applicant pursuant to this Credit Agreement and agree to be personally liable and bound to pay the creditor as defined above (including any successors and /or assigns), upon demand, any amount which are due on the Applicant's account and which the applicant has failed to pay.
2. In connection with this application, the undersigned hereby certifies that the above statements, which are submitted for the purpose of obtaining credit, are true, correct and complete. It is further agreed that Jettco International Inc. will promptly be notified of any material changes in the above information.

CREDIT RELEASE AUTHORIZATION

DATE: _____

RE: _____
Customer Name

I hereby authorize Jettco International Inc. to verify any credit information from whatever source it deems appropriate and I further authorize our banks, trade references and financial institutions the right to release by phone or fax. All credit information obtained will be treated confidentially and will be used on only in assisting Jettco International Inc. issuing credit approvals. A copy or fax of this credit release authorization may be deemed to be equivalent of the original.

BANK NAME: _____

ACCOUNT NUMBER: _____

NAME: _____

TITLE: _____

SIGNATURE: _____

DATE: _____

Please feel free to reach me at () _____ if you have further questions or comments.