

**Accar Ltd., Inc. – dba: Bezels for Watches**

Confidential Business Account Credit Agreement

COMPANY INFORMATION		FL Sales Tax #:
Company Name		Year Established
State of Incorporation		Owner/CEO Name
Office Phone		Website
Fax Number		Email
Physical Address City, State ZIP		Cell Phone
		Professional Affiliations & member #'s:

FINANCIAL CREDIT INFORMATION			
Bank Name:		Years at this financial institution?	
Bank Address:		Business Account(s) Account Number	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other
Phone		Personal Account(s) Account Number	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other

BUSINESS/TRADE REFERENCES * Must include a fax or email for each reference			
Company Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Contact Name		Other	
Company Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Contact Name		Other	
Company Name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Contact Name		Other	

**TERMS & CONDITIONS**

By signing below, you accept the following terms and conditions:

**\*\* PLEASE INCLUDE YOUR SALES CERTIFICATE WHEN SUBMITTING THIS FORM \*\***

You authorize Accar Ltd., Inc. to make inquiries into the banking and business/trade references that you have supplied. You warrant that all of the information you have provided is true and accurate and that you are authorized to enter into this credit agreement on behalf of the company. You understand that this is an ongoing credit agreement that Accar Ltd., Inc. may, at its option and for any reason, cancel at any time. If at any time payment on the account is late, Accar Ltd., Inc. may, at its option, elect to collect the full amount due immediately and to proceed with legal collection if necessary. In the event of non-payment or default, you agree to personally guarantee payment of the debt, including if necessary, collection costs and attorney's fees. Accar Ltd., Inc. shall not be deemed to have waived any rights it may have under the law to collect on this account, both from the company and the individual signing.

SIGNATURES			
Signature		Signature	
Name and Title		Name and Title	
Date		Date	

**DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY**

Web Check:		Phone Greeting:		Credit Limit:	
Physical Store:				Terms:	
Phone Verificat:				Sales Cert:	<input type="checkbox"/> YES <input type="checkbox"/> NO

Please fax back to (305) 373-6804 or email directly to [accounting@accarltd.com](mailto:accounting@accarltd.com)