

**BLU-TACK**     
  **J.A. MICHELL**     
  **MONOLITE**     
  **PRISMA CABLE**  
 **SONUS SYSTEMS**     
  **TENDERFEET**     
  **OTHER** \_\_\_\_\_

Company Name \_\_\_\_\_ DBA \_\_\_\_\_

**Store Location(s):**

1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_

Principal Contact/Buyer \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Store Type:** Hi End Salon  Independent Specialty  Specialty Chain  Cust. Installer only

Is this a store front? \_\_\_\_\_ Is this your residence? \_\_\_\_\_ Other \_\_\_\_\_

Is this your Primary Business?  Secondary Business?  Incorporated  Individual

Member of Buying Group?  Name of Buying Group: \_\_\_\_\_

Years in Business \_\_\_\_\_ No. of full time Sales People \_\_\_\_\_ No. of part time Sales People \_\_\_\_\_

No. of Stereo-only Sound Rooms \_\_\_\_\_ No. of Home Theatre Rooms \_\_\_\_\_ Total No. of rooms \_\_\_\_\_

Sales Floor square footage \_\_\_\_\_ Custom Install Service?  In-Store Warranty Service?

Contractor's Licence # \_\_\_\_\_ Retail Sales Tax # \_\_\_\_\_

**Primary Promotional Vehicles** (Check all that apply):

Radio  Press  Direct Mail  Internet  Local shows  Other \_\_\_\_\_

**Product Mix** (List the various lines that you currently sell)

Electronics: \_\_\_\_\_  
\_\_\_\_\_

Speakers & Cables: \_\_\_\_\_  
\_\_\_\_\_

Ever been a dealer for Artech's products before? \_\_\_\_\_

If so, when & why dropped? \_\_\_\_\_

Comments \_\_\_\_\_  
\_\_\_\_\_

Rep. nominating this account: \_\_\_\_\_ Date: \_\_\_\_\_

Artech approval: \_\_\_\_\_ Date: \_\_\_\_\_

# Artech Electronics Ltd.

## Application for Credit - USA

Name of company \_\_\_\_\_ DBA \_\_\_\_\_

Mailing address \_\_\_\_\_ Years in business \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Store telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail address \_\_\_\_\_

Accounting telephone # \_\_\_\_\_ Person in charge of payables \_\_\_\_\_

Shipping address if different from above \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Do you advertise on the Internet? \_\_\_\_\_ Internet address \_\_\_\_\_

State Resale Sales Tax licence number \_\_\_\_\_

	<u>Names of officers or owners</u>	<u>Title</u>	<u>Home address</u>	<u>Home Tel. #</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

### PRINCIPAL CREDITORS

Please supply **complete** addresses and telephone numbers.

Supplier Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

Supplier Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

Supplier Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

Supplier Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

Supplier Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

(PLEASE COMPLETE OTHER SIDE)

# Bank References

Name of Bank \_\_\_\_\_ Bank Manager \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Account numbers \_\_\_\_\_

Do you have a line of Credit? \_\_\_\_\_ How much? \_\_\_\_\_

Do you floorplan? \_\_\_\_\_ Transamerica  Nation's  Whirlpool  AT+T  ITT  other \_\_\_\_\_

Amount of credit you are requesting from Artech Electronics Ltd. \$ \_\_\_\_\_

Our terms are net 30 days. Until credit is established all orders must be accompanied by payment. In exchange for the courtesy of credit, a finance charge of 1.5% per month (18% per annum) is levied on overdue balances. Returned merchandise is subject to a 15% restocking fee. Payments returned for any reason are subject to a \$25.00 service charge.

I declare that all of the above information is true. I authorize Artech Electronics to conduct a thorough credit check to establish a line of credit. It is agreed that all goods purchased or loaned from Artech Electronics Ltd. remain the property of Artech Electronics Ltd. until paid for in full. It is further understood and agreed that all invoices not paid for as per invoice terms will be accessed a finance charge as stated above.

Authorized signature \_\_\_\_\_

Name (please print) \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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