



Ready-to-Work  
Office Cubicles

**CREDIT APPLICATION - please FAX to 925-371-1212**

**Company Name** \_\_\_\_\_ Doing Business As \_\_\_\_\_  
(the "Applicant")

Billing Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

Main Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Person of Contact \_\_\_\_\_

Shipping Address \_\_\_\_\_  
(if different from Billing Address) (Street) (City) (State) (Zip code)

Ownership: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Owner \_\_\_\_\_ Federal Tax ID # \_\_\_\_\_

Type of Business \_\_\_\_\_ Date Established \_\_\_\_\_ No. of Employees \_\_\_\_\_

Dun & Bradstreet Listed? \_\_\_YES \_\_\_NO Dun & Bradstreet # \_\_\_\_\_

**Officers Information**

Name \_\_\_\_\_ Title \_\_\_\_\_

Home Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

Name \_\_\_\_\_ Title \_\_\_\_\_

Home Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

**Bank Information**

Name of Main Bank \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

Account Number \_\_\_\_\_ Open since \_\_\_\_\_ Average Balance \$ \_\_\_\_\_

**Trade References**

Company Name (1) \_\_\_\_\_ Contact \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

Company Name (2) \_\_\_\_\_ Contact \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

By affixing their signatures below, the undersigned (or if a Corporation, the corporate authorized Officers and agents) and the Applicant company agree 1) that the information contained herewith is warranted to be true and correct, 2) to pay when due all invoices from Cube in-a-Box LLC., 3) that in the event of payment default when due, all costs of collection, including attorney's fees and court costs, shall be paid by the Applicant, 4) to authorize Cube in-a-Box LLC. to investigate any references herein listed or statement or any other data obtained from any person pertaining to the credit worthiness or financial responsibility of the Applicant, 5) that personal guarantee is part of this agreement, 6) that the Applicant and Officers have carefully read and agreed upon all the Terms and Conditions of Sale of Cube in-a-Box LLC. available online on the company web site.

Corporate Officer Signature \_\_\_\_\_ Title \_\_\_\_\_ Name \_\_\_\_\_

Accepted by \_\_\_\_\_ Title \_\_\_\_\_ Name \_\_\_\_\_  
(Cube in-a-Box LLC. authorized Officer or agent signature)