



AYCA FURNITURE

4495 E. Wall St., #106, Ontario, CA 91761, U.S.A.
Tel: (909) 390-5357 • Fax: (909) 390-9408

Credit Application

This information is submitted to Crescent Woodworking Co., Ltd. for consideration as a basis for the extension of credit to us:

Company: _____

Billing Address: _____

Phone Number: _____ Fax #: _____

Years in Business: _____ Email Address _____

Duns/Resale#: _____ or Social Security Number: _____ Fed ID #: _____

Check One: Corporation Individual Owned
 Joint Venture Limited Partnership

State of Incorporation: _____

Amount of Credit Requested: _____

Bank Reference: _____

Account Number: _____

Contact and Fax Number: _____

Supplier/Trade References:

Name	Contact	Phone	Fax

Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with the following terms: net 30 days.

Payment Delinquency: Buyer agrees to pay Seller interest at the rate of 1-1/2% per month (or such other rate as is permitted by applicable laws) on any unpaid balance in the event of Buyer's default in payment in accordance with scheduled dates and amounts. Buyer further agrees that upon any such default, Seller may declare entire amount due and enforce collection of all amounts outstanding irrespective of any other provisions contained herein, including provisions for deferred or installment payments. Buyer agrees to pay all costs and expenses incident to default in the terms herein and relating to the collections of amounts owed hereunder including attorney's fees.

Firm Name: _____ Date: _____

By: _____ Title: _____

(Name)

(Signature)

- The above information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize the firm to whom this application is made to investigate the references listed pertaining to my/our credit and financials.



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BANK AUTHORIZATION

I AUTHORIZE THE RELEASE OF MY CREDIT INFORMATION TO AYCA FURNITURE, LTD. FROM THE FOLLOWING BANK ACCOUNT.

BANK NAME: _____

TEL: _____ FAX: _____

CHECKING ACCOUNT NO: _____

COMPANY NAME: _____

SIGNATURE: _____ TITLE: _____

***** FOR BANK USE ONLY *****

DATE ACCOUNT OPENED: _____ ANY NSF CHECKS: _____

AVERAGE BALANCE: _____ CREDIT LINE: _____

OUTSTANDING LOAN BALANCE: _____ (LOW, MEDIUM, HIGH)

BANK OPINION: _____

SIGNATURE: _____ TITLE: _____

DATE: _____