



Div. Tower Products, Inc.
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Please Print or Type

USA & CANADIAN CREDIT APPLICATION

You Must Complete all Sections or this Form will be **RETURNED**.

PLEASE INCLUDE SIGNED CERTIFICATE OF RESALE/TAX EXEMPT FORMS IF APPLICABLE.

I Prefer Paperless Billing

Net 20 Open Account / Desired Amount: \$ _____

Paperless E-Mail Address * _____

Name of Firm _____

Corporation Partnership Proprietorship LLC

Street _____

Subsidiary of _____

P.O. Box _____

Type of Business _____

City _____ State _____ Zip _____

Resale/Sales Tax No. _____

Country USA CANADA

SS# _____ Or F.E.I.N. _____

Phone _____ Fax: _____

Purchasing Name _____

Website(s) - ALL _____

Purchasing Phone _____

Of Years In Business _____ # Of Employees _____

Purchasing Email _____

Other Locations? Yes No If Yes, How Many? _____

Accts. Payable Name _____

How Did You Hear About Markertek? _____

Accts. Payable Phone _____

Accts. Payable Email _____

Business Operates From Own Building Office Building Home Other _____

What Markertek Products Are You Interested In? _____

IMPORTANT! Please provide your Company Profile or internal contact information (sales, purchasing etc.) so we may keep you updated with new products and literature.

* Although I have provided my e-mail, I **do not** wish to receive promotional e-mails sent by Markertek.

Please List a MINIMUM OF TWO Manufacturers/Distributors for Which You are a Dealer or Reseller With Whom You Currently Have Open Account Terms. (Required)

1. Company _____

2. Company _____

Account # _____

Account # _____

Phone & Fax _____

Phone & Fax _____

Contact _____

Contact _____

Email Address _____

Email Address _____

Please Provide Banking Information

Name of Bank _____

Bank Contact _____

Bank Phone # _____

Bank E-mail Address _____

Has the firm or any of its principals ever been Bankrupt? Yes No

If Yes, explain _____

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

We Subscribe To

**Experian
Credit Services**

CONTINUED:

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (Net 20) and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

I certify that all statements made by me in this application are correct to my knowledge. I authorize Markertek to investigate & verify the information I have provided herein. I have read and accept the Terms & Conditions: <http://www.markertek.com/guarantee.asp>

Name of Business _____

Signature _____ Title _____

Name (Print) _____ Date _____

Terms and Conditions:

Net 20 account customers may be required to keep an updated credit card on file with Markertek as a backup payment source for the account in the event that any invoices become more than 60 days past due. A representative will contact you by phone to securely acquire your Credit Card information if deemed necessary.

Although security may be a concern, your CID information will not be stored. Only PAN information is kept on file in a password protected database.

Personal Guarantee

In consideration for Markertek extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to Markertek by the business identified below whether said sums are due under open account, contract or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limit required as stated in the credit agreement between Markertek and the business. Markertek shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by Markertek.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by Markertek. Said notice shall specify the date on which this guaranty is to be terminated; said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date _____

Name _____ (Name of person guaranteeing payment, NO TITLE)

Home address _____

Home Phone # _____

SS# _____

Signature of person guaranteeing payment _____

Name of Business whose account is guaranteed _____

Open account privileges are pending our credit approval.

