



BUSINESS INFORMATION

Name of Business (d/b/a) _____

Corporate Name _____ Federal ID # _____

Corporation Partnership LLP LLC Non- Profit Sole/Individual Owned

Years in Business _____ Type of Business _____

Street Address _____ City _____ State _____ Zip _____

Billing Address _____ City _____ State _____ Zip _____

Business Ph # _____ Accounts Payable Ph # _____ Fax # _____

Name of A/P Contact _____

NAME AND ADDRESS OF OFFICERS, OWNERS, or OTHER RESPONSIBLE PARTIES

(1) Name _____ SSN: _____ Title _____

Address _____ Phone # _____ City _____ State _____ Zip _____

(2) Name _____ SSN: _____ Title _____

Address _____ Phone # _____ City _____ State _____ Zip _____

BANKING INFORMATION

Bank Name _____ Telephone Number _____

Account Number _____ Contact Name _____

Do you have a borrowing relationship with this bank? Yes No

LIST THREE TRADE REFERENCES WITH WHOM YOU HAVE HAD CREDIT (TERMS) FOR A MINIMUM OF ONE YEAR

(1) Company Name _____ Account Number _____

Contact Name _____ Telephone # _____

(2) Company Name _____ Account Number _____

Contact Name _____ Telephone # _____ Fax # _____

(3) Company Name _____ Account Number _____

Contact Name _____ Telephone # _____ Fax # _____

READ BEFORE SIGNING

For the purpose of establishing credit with Planet Proto or Inergi Exhibit & Design Inc., its subsidiaries, divisions and/or affiliates, the undersigned warrants the information listed on this application to be true, correct and complete to the best of his/her knowledge. The undersigned authorizes Planet Proto or Inergi Exhibit and Design to perform any credit investigation needed to verify the information contained in this application. The undersigned agrees to terms of Net 30 days unless otherwise agreed upon in writing by Planet Proto or Inergi Exhibit and Design, its subsidiaries, divisions, and affiliates. In the event of legal action applicant agrees to pay all costs and attorney fees. Any balance over 30 days may be subject of a service charge of 1.5% interest per month (18% per annum)

MUST BE SIGNED BY AN OFFICER OR OWNER OF THE COMPANY

SIGNATURE _____ DATE _____

PRINT NAME _____ TITLE _____