



COMMERCIAL CREDIT APPLICATION

Creditor: Invicta Foam Products, LLC

Address: 753 Northport Drive, Ste A, West Sacramento, CA 95691

Phone: 877-230-8746 | Email: info@invictafoam.com

I. CLIENT BUSINESS INFORMATION

- Legal Business Name: _____
- DBA (if different): _____
- Federal Tax ID (EIN): _____ State of Inc: _____
- Years in Business: _____ Years at Current Location: _____
- Physical/Shipping Address: _____
- Billing Address: _____
- A/P Contact Name: _____ A/P Email: _____
- Sales Tax Status: [] Taxable [] Exempt (Please attach Resale Certificate)

II. PRINCIPAL / OWNER INFORMATION

Name: _____ Title: _____ Ownership %: _____ SSN: _____
 Home Address: _____

III. BANKING REFERENCES

- Bank Name: _____ Account #: _____
- Contact Person: _____ Phone: _____

IV. TRADE REFERENCES (Current Suppliers)

1. Company: _____ Contact: _____ Email: _____
2. Company: _____ Contact: _____ Email: _____
3. Company: _____ Contact: _____ Email: _____

V. CREDIT REQUEST & PAYMENT TERMS

- Credit Limit Requested: \$ _____
- Agreed Payment Terms: * 1% 10 Net 30: **A 1% discount is available if the invoice is paid within 10 days of the invoice date.**
 - Otherwise, the full (net) invoice amount is due within 30 days.

VI. TERMS AND CONDITIONS

1. Late Payments: Invoices not paid within 30 days are subject to a late fee of 1.5% per month (18% per annum).
2. Credit Investigation: The Applicant authorizes Invicta Foam Products, LLC to contact the references listed above and to obtain credit reports (business or personal) to determine creditworthiness.
3. Default: In the event of a default, the Applicant agrees to pay all costs of collection, including reasonable attorney fees.
4. Personal Guarantee: If the Applicant is a closely held corporation or LLC, the undersigned officer/owner personally and unconditionally guarantees the prompt payment of all amounts due.

VI. AUTHORIZATION

I certify that the information provided is true and correct. I have read and agree to the terms and conditions of Invicta Foam Products, LLC.

Authorized Signature: _____ Date: _____
 Printed Name: _____ Title: _____