



Please Help Us Serve You Better

To expedite the processing of your application for credit with Dache, Inc. we require that this form be filled out completely and signed on page 2 (by Owner).

Adherence to this policy will ensure all necessary information is collected and will help expedite open account status.

Thank you in advance for completing this application. We will make every effort to approve your firm for open credit terms.

Please know that the information provided to Dache, Inc. on the following forms will be used exclusively for the purpose of establishing an open account (Net 30 Terms) and will be held in strictest confidence.

We at Dache, Inc. appreciate your business and look forward to your success with our products.

Best Regards,

Cheryl Northup
Dache, Inc.



APPLICATION FOR TRADE CREDIT

General Information

Company Information		
Company Name:	Parent Company:	
Phone Number:	Fax Number:	
Ownership: (check the one that applies)		
<input type="checkbox"/> Corporation	Federal ID #:	
<input type="checkbox"/> Sole Proprietorship	Social Security #:	
<input type="checkbox"/> Partnership	Social Security #:	
Contact Name:	Phone:	email:
A/P Contact Name:	Phone:	email:
Bill To Address:		
City:	State:	Zip:
<input type="checkbox"/> Different Shipping Address		
Ship To Address:		
City:	State:	Zip:

- The undersigned warrants that the information contained in this credit application is full, true and correct as of the date of this application;
- The undersigned agrees to provide updated and supplemental credit information and such assurance of payment as may be required by Dache, Inc.;
- The undersigned authorizes the bank(s) and companies with which it maintains accounts and credit reporting agencies to release information to Dache's representatives, as they deem necessary to complete their credit investigation;
- Applicant shall pay the full amount of the invoice(s) when due, which is defined to be 30 days from the invoice date, unless otherwise specified on the invoice;
- If payment in full is not received by the due date, applicant shall owe, in addition to the invoice amount, a late payment fee of 1.5% per month, or the maximum allowed by law, on all unpaid invoices, plus costs of collection, including attorney's fees, court costs, and collection fees that Dache, Inc. may incur in recovering the amount owed;
- Applicant agrees that venue and jurisdiction for any such court action shall properly be brought in a Court located in San Diego County, California - the principle place of business of Dache, Inc. and that the law of California shall apply;
- Applicant acknowledges receipt of and agrees hereafter to accept Dache's Dealer Sales Policy and as may also be set forth on Dache's invoices.

Dache, Inc. does not discriminate against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the Applicant has the legal capacity to enter into a binding contract); if credit is denied, the applicant has the right to request in writing within 60 days the reason for the adverse action.

NOTE: If account is authorized to purchase product on open account, be it understood that all purchases be due and payable 30 days from the invoice date. The undersigned official, to induce the granting of credit to the above-named firm, hereby individually and jointly, personally guarantees all obligations of the applicant company to Dache, Inc.

THE UNDERSIGNED HAS READ AND UNDERSTANDS ALL OF THE ABOVE

COMPANY NAME _____ DATE _____

SIGNATURE _____ PRINT NAME _____
(OWNER) Individually & as an Officer of the Firm

After completion, please mail the application to Dache, Inc., 35892 Burgundy Court Winchester, CA 92596.
 If faxing, please mail the application to the above address after you have faxed it to Dache, Inc. at 951-325-2057.



APPLICATION FOR TRADE CREDIT

Company Information

Company Information	
Year Founded:	Years at Present Location:
No. of Employees:	Annual Sales Volume:
Are POs required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Dunn & Brad Rated? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are POS Barcodes required? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Principals

Principal #1		Principal #2	
Name:		Name:	
Title:		Title:	
Home Address:		Home Address:	
City:	State:	Zip:	

Persons Authorized to Place Orders:

Name/Title:	Name/Title:
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Banking Information

Bank Name:	Bank Account Type:
Account #:	Bank Contact:
Address:	
City:	State: Zip:
Bank Phone:	Bank Fax:

Trade References

Company Name:	Account opened (mo/yr):
Account #:	A/P Contact Name:
Address:	City: State: Zip:
Phone:	Fax:

Company Name:	Account opened (mo/yr):
Account #:	A/P Contact Name:
Address:	City: State: Zip:
Phone:	Fax:

Company Name:	Account opened (mo/yr):
Account #:	A/P Contact Name:
Address:	City: State: Zip:
Phone:	Fax:

Company Name:	Account opened (mo/yr):
Account #:	A/P Contact Name:
Address:	City: State: Zip:
Phone:	Fax: