

# OCTANE PRESS CREDIT APPLICATION

APPROVAL DATE \_\_\_\_\_

\_\_\_\_\_  
TODAY'S DATE

Corporate Name \_\_\_\_\_ Phone No. \_\_\_\_\_

DBA Name \_\_\_\_\_ Website/Email \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Resale Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Type of Ownership: \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ LLC

Year Business established \_\_\_\_\_ How long have you owned the business \_\_\_\_\_ At present location since \_\_\_\_\_

Federal ID # \_\_\_\_\_ State Corporate ID # \_\_\_\_\_

Owner's Name \_\_\_\_\_ Owner's Social Security # \_\_\_\_\_

Owner's Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone # \_\_\_\_\_

Name of Bank \_\_\_\_\_ Account Number \_\_\_\_\_

Address \_\_\_\_\_ Account Number \_\_\_\_\_

\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

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## REFERENCES: PLEASE USE SECOND PAGE

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**STANDARD TERMS AND CONDITIONS OF SALE: Octane Press LLC may utilize the above information to obtain a credit report on the applying entity and/or the individual owners.** It is agreed that sales of products by Octane Press based on the terms and conditions outlined in the Octane Press discount schedule. 2From the above information please establish an OPEN account with Octane Press LLC, I understand that all account balances are payable in Travis County in the state of Texas. I also understand that interest will be charged on past due balances at a rate not to exceed the maximum nonusurious interest rate of 1-1/2% per month, whichever is less. If you fail to make the Minimum Required Payment when due, you agree that Octane Press may close your Account to future purchases and Octane Press may demand immediate payment of your entire Account balance, after any notice and opportunity to cure the default required by applicable law. If Octane Press has to entered into collection proceedings, it is agreed it shall be entitled to collection costs plus reasonable attorney fees. In addition, you agree that Octane Press shall have all the rights of a secured creditor under the Uniform Commercial Code and other applicable law and may file a lien at its sole option. You agree that Octane Press can delay enforcing its rights hereunder without waiving them.

**GUARANTY:** The undersigned Guarantor (s) in order to induce Octane Press to extend credit to applicant herein, does hereby unconditionally personally guarantee all sums which may be owed by applicant to Octane Press whether said indebtedness is due now or hereafter incurred and whether the indebtedness arises from open account, COD, or otherwise. This Guaranty is continuing and shall continue to apply to all indebtedness which applicant may hereafter incur, renew, or extend in whole or in part with Octane Press all without notice to the undersigned Guarantor (s). Octane Press may modify the indebtedness, accept, or release collateral, or release the applicant, without releasing the undersigned Guarantor (s). The undersigned Guarantor (s) waives notice of acceptance of the Guaranty. The undersigned Guarantor (s) promise to pay the indebtedness and obligations incurred thereunder at Octane Press in Travis County in the state of Texas.

*Signature hereby agrees to the terms and conditions above and authorizes bank, references and/or credit agencies to release credit information to Octane Press LLC only*

Signed this \_\_\_\_\_ day of \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Guarantor

\_\_\_\_\_  
Signature of Guarantor

\_\_\_\_\_  
Signature of Owner Partner Officer

\_\_\_\_\_  
Print name of Guarantor

\_\_\_\_\_  
Print name of Guarantor

\_\_\_\_\_  
Print Name

REFERENCES: Please list only companies you buy from on an open account basis.

REFERENCES	OFFICE USE ONLY
Name _____ Address _____ City _____ State _____ Zip _____ Phone (     ) _____ Type of Account:   Open _____ COD _____ Credit Card _____	
Name _____ Address _____ City _____ State _____ Zip _____ Phone (     ) _____ Type of Account:   Open _____ COD _____ Credit Card _____	
Name _____ Address _____ City _____ State _____ Zip _____ Phone (     ) _____ Type of Account:   Open _____ COD _____ Credit Card _____	
Name _____ Address _____ City _____ State _____ Zip _____ Phone (     ) _____ Type of Account:   Open _____ COD _____ Credit Card _____	
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