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CREDIT APPLICATION & TERMS OF SALE

Company Data:

Corporate Name: _____

DBA: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone#: _____ Fax #: _____

Account Payable Contact: _____

AP - Phone#: _____ AP-Email #: _____

Federal Tax ID#: _____ State Tax ID (Hard Copy Needed) _____

E-Mail Address _____ Web Site: _____

How Long In Business: _____ Individual: _____ Partnership: _____ Corporation: _____

DNB#: _____

Legal Owner(s) or Corporate Officer(s):

Name: _____ Title: _____ Ph: _____

Name: _____ Title: _____ Ph: _____

Has the Business ever declared bankruptcy: No _____ Yes _____

If Yes, When and under what circumstances: _____

Is the Business currently involved in any litigation which may affect its ability to pay invoices within terms:

No _____ Yes _____

Bank Information #1 :

Name: _____ Account #: _____

Bank Contact: _____

Address: _____

City: _____ State: _____ Zip Code _____ Phone: _____

Borrowing Account #2 :

Name: _____ Account #: _____

Loan Officer: _____

Address: _____

City: _____ State: _____ Zip Code _____ Phone: _____

Trade References (List only those with open accounts) Separate Attachment

1. Company Name _____ Contact _____

Address: _____ City: _____

State: _____ Zip _____ Phone #: _____

2. Company Name _____ Contact _____

Address: _____ City: _____

State: _____ Zip _____ Phone #: _____

3. Company Name _____ Contact _____

Address: _____ City: _____

State: _____ Zip _____ Phone #: _____

4. Company Name _____ Contact _____

Address: _____ City: _____

State: _____ Zip _____ Phone #: _____

You agree to pay all invoices when due, and you acknowledge that any invoices not paid when due are delinquent and will be subjected to an 18% finance charge. You agree to pay any collection fees, including attorney's fees, that we should incur though our efforts to collect delinquent invoices. You certify that all information you supply is true and correct to the best of your knowledge, and you authorize us to obtain information regarding credit history from sources including but not limited to the references listed above and from credit reporting services. The extension, continuation and termination of credit are within our sole discretion and you agree that your continued solvency is a pre-condition to any sales to you by us.

If Credit is provided, Payment is due in full within 30 days from the date of our invoice (net 30 day terms) unless other terms have been agreed to in advance. If applicable, we will add sales tax to your invoice based on the ship to state, and you are responsible for paying this tax along with the product price unless you provide us a tax exemption certificate acceptable to the taxing authorities.

Any advice we may provide does not relieve you from your sole responsibility for proper product and service selection, use and maintenance. Our sales are subject exclusively to these terms along with the terms of any quotation or order form

Applicant gives permission for Atlantic Battery Systems to do a credit check with the applicant's bank/Financial institution as well as trade references. This is not limited at time of account setup, but from time to time, including prior to shipments.

No oral agreements or modifications will be accepted or effective. Original Signed copies must be mailed back to ABS.

The Undersigned certifies that all information provided on page 1 and page 2 is true and accurate and will be used and based to make credit available.

Type or Print Name: _____ Title: _____

Signature of Owner or Majority Shareholder: _____

Date: _____