



CREDIT APPLICATION

CBM – Business Machines
 647 Franklin Street
 Johnstown, PA 15901
 Telephone: (814) 536-5356
 Fax: (814) 535-7690
 Toll Free: 800-452-COPY (2679)
 Internet: www.gcbm.com

CORPORATION NON-PROFIT PARTNERSHIP PROPRIETORSHIP INDIVIDUAL

INFORMATION ON OFFICERS, PARTNERS, OR INDIVIDUALS:

NAME _____ TITLE _____

NAME OF SPOUSE _____

HOME ADDRESS _____ PHONE _____

BILLING INFORMATION:

SHIPPING INFORMATION:

ORGANIZATION _____

ADDRESS _____

ADDRESS _____

PHONE _____ FAX _____

SALES TAX EXEMPT # _____ PO ON ORDER REQUIRED? YES NO

If credit terms are desired, please complete the following information:

BANK REFERENCES:

SS # _____

BANK #1 _____

BANK #2 _____

ADDRESS _____

ACCOUNT # _____

YEAR OPENED _____ PHONE _____

OFFICER _____

TRADE REFERENCES:

COMPANY	ADDRESS/CITY/STATE/ZIP	PHONE
#1 _____	_____	_____
#2 _____	_____	_____
#3 _____	_____	_____

FOR COMPANY USE ONLY

APPROVED NOT APPROVED RATING _____ AMOUNT \$ _____ BY _____

I hereby authorize CBM-Business Machines or any credit bureau or other agency employed by CBM-Business Machines to investigate the herein listed information, statement or other data obtained from me or any other person pertaining to my credit and financial responsibility.

PAYMENT TERMS: Net due upon receipt of invoice. Finance charge of 1.5% after 15 days (annual percentage rate of 18%) on unpaid balance. If you do not pay the balance when due or if you should breach any other terms of any agreement with CBM, CBM may pursue any other legal action deemed necessary or appropriate with respect to your ACCOUNT. You agree to pay all costs of collection, including attorney fees and balance then due and owing as determined by the governing state laws. If, in our opinion, the financial condition of purchaser at any time does not justify continuance of shipment on the terms of payment specified, we may require a full or partial payment in advance.

CONFESSION OF JUDGEMENT: If I don't, within its terms, pay the invoice which CBM sends to me as a result of any transaction I hereby authorize & empower any attorney of any Pennsylvania Court of Record or of any other state to appear for me & CONFESS JUDGEMENT in favor of CBM in the amount of the agreement together with interest at the maximum amount allowed by law along with all costs of suit & all expenses & with 35% added for attorney's fees, without any right of setoff whatsoever. **WAIVER OF ERRORS & DEFECTS:** I hereby waive & release all errors, defects, & imperfections whatever in the entering of judgment & agree that no motion or rule to open or strike off judgment, or motion to stay or set aside executions shall be made; & that no writ of error or appeal shall be taken. I further agree that the right & power to appear & to enter or confess judgment shall be exercisable any number of times & shall not be exhausted by one or more uses, whether defective or otherwise.

Signature and Title

Amount Requested

Date