



CREDIT APPLICATION

BUSINESS NAME _____ PHONE _____
 EMAIL _____ FAX _____
 MAILING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 SHIPPING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 OWNER'S HOME ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 DRIVERS LICENSE # _____ STATE _____ SS# _____
 SPOUSE'S NAME _____

YEARS IN BUSINESS _____ TYPE OF BUSINESS _____
 ESTIMATED MONTHLY PURCHASES \$ _____ SALES TAX # _____
 BUSINESS TYPE: PARTNERSHIP CORPORATION LLC
 IS A PURCHASE ORDER REQUIRED? YES NO
 PERSON(S) AUTHORIZED TO BUY _____

BANK - SAVINGS ACCOUNT # & ADDRESS _____

 BANK - CHECKING ACCOUNT # & ADDRESS _____

TRADE REFERENCES - 3 REQUIRED:

NAME	ADDRESS	PHONE

AIRCRAFT ACCESSORIES OF OKLAHOMA, INC. TERMS: Net 30. Pay from invoice. Late charges accrue at a rate of 1.5% on unpaid balances. 20% RESTOCKING FEE ON ALL RETURNED GOODS. Please enclose a current financial statement.

I promise to pay my monthly purchases by the terms of AIRCRAFT ACCESSORIES OF OK, INC. each month. I further assume responsibility of all bills contracted in my name or the business name at the above address. In the event it becomes necessary for the company to incur any collection costs or suits to collect under this agreement, the undersigned promises to pay such additional costs of collection and such sum as the court may judge reasonable as attorney's fees on said suit. Furthermore, I agree to pay a finance charge of 1.5% per month on delinquent accounts.

PERSONAL GUARANTEE - WITHOUT A SIGNATURE IN THIS SECTION, THIS APPLICATION WILL NOT BE ACCEPTED.

In consideration of AIRCRAFT ACCESSORIES OF OK, INC., extending credit to _____ hereby personally guarantee any and all amounts owed by the above named corporation to AIRCRAFT ACCESSORIES OF OK, INC. I further agree that on demand I shall personally pay all amounts owed by said corporation to AIRCRAFT ACCESSORIES OF OK, INC. In the event it becomes necessary for your company to incur any collection costs or cost of suits that the court may judge as reasonable attorney's fees to said suit to collect the monies owed, I agree to pay any and all such costs of collection.

PRINT NAME _____ DATE _____
 SIGNATURE _____