



CREDIT APPLICATION

BUSINESS INFORMATION	Full Legal Name		Dun & Bradstreet Number	
	Business Street Address			
	City/County/State/Zip			
	Equipment Location (if different from above) Street Address/City/County/Zip		<input type="checkbox"/> Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Corporation Date of Inc. _____ State of Inc. _____ <input type="checkbox"/> S Corporation Date of Inc. _____ State of Inc. _____ <input type="checkbox"/> Limited Liability <input type="checkbox"/> State or Local Gov't	
	Contact	Phone No. ()		
	E-Mail Address	Fax No. ()		
	Nature of Business	Years Under Current Ownership		No. of Employees
	Principal/Partner/Officer	Title		Social Security No.
	Home Street Address			
	City/State/Zip			Phone No. ()
Accounts Payable Contact	Title	Phone No. ()		
Billing Street Address				
City/State/Zip				
BILLING INFORMATION (Must Complete)				

BANK REFERENCE	Bank Reference Name 1.		Account/Loan Officer	Phone No. ()	
	Address (City, State)		Checking/Loan Account No.		
	Bank Reference Name 2.		Account/Loan Officer	Phone No. ()	
	Address (City, State)		Checking/Loan Account No.		

TRADE REFERENCE (Must Complete)	Trade References (Name, City, State)	Contact Name	Account No.	Phone No. ()
	1.			Phone No. ()
	2.			Phone No. ()
	3.			Phone No. ()

OTHER INFORMATION	Present Landlord	Phone No. ()	Tax Identification Number
	Have you ever filed for bankruptcy or reorganization for benefit of creditors? Yes ___ No ___ (If yes, explain)		
	Have you ever been sued by any person or entity for alleged non-payment of debt? Yes ___ No ___ (If yes, explain)		
	Resale No.	Is this a taxable account? Yes ___ No ___	

TERMS AND RELEASE	The applicant's signature attests financial responsibility and that the information and statements in this application are true and complete. LightPointe Communications, Inc. is hereby authorized to obtain credit information from all of but not limited to the above listed references in order to establish an open line of credit. Upon credit approval, applicant agrees to <i>terms of net 15</i> or specified other terms by LightPointe Communications, Inc. If for any reason the undersigned is unable to pay, applicant authorizes LightPointe Communications, Inc. to bill a service charge of 1.5% per month on unpaid balance. Applicant agrees to pay reasonable attorney or collection fees plus interest in case of default in payments in compliance with terms. Applicant authorizes release of financial statements and/or personal guarantee upon request of LightPointe Communications, Inc.		
	Authorized Signature	Print Name and Title	Date
	For Office Use Only	Customer Account No.	Credit Limit