



# HIGH OUTPUT

## B BUSINESS ACCOUNT APPLICATION

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<b>CORPORATE OR COMPANY NAME:</b>	<b>PHONE:</b>	<b>FAX:</b>	
<b>STREET ADDRESS:</b>	<b>CITY:</b>	<b>STATE:</b>	<b>ZIP:</b>
<b>BILLING ADDRESS:</b>	<b>CITY:</b>	<b>STATE:</b>	<b>ZIP:</b>
<b>TYPE OF BUSINESS (CIRCLE ONE):</b> Sole Owner Partnership Corporation	<b>YEARS IN BUSINESS:</b>		
<b>FEDERAL TAX ID OR SOCIAL SECURITY #:</b>	<b>TAX EXEMPT (CIRCLE ONE):</b> No Yes (If yes, attach the appropriate State Exemption or Resale Cert.)		
<b>DOES YOUR COMPANY USE PURCHASE ORDERS (CIRCLE ONE):</b> No Yes	<b>IF YOUR COMPANY USES PURCHASE ORDERS, ARE THEY (CIRCLE):</b> Written Verbal Required		
<b>ACCOUNTS PAYABLE CONTACT NAME:</b>	<b>ACCOUNTS PAYABLE CONTACT PHONE NUMBER:</b>		
<b>PRIMARY CONTACT(S) / AUTHORIZED PURCHASERS</b>	<b>MONTHLY AMOUNT OF CREDIT REQUESTED:</b> \$		

### Trade References:

Please list at least three businesses with which you have an open account and which are not directly affiliated with your own company.

<b>NAME:</b>	<b>CONTACT:</b>
<b>PHONE:</b>	<b>FAX:</b>

<b>NAME:</b>	<b>CONTACT:</b>
<b>PHONE:</b>	<b>FAX:</b>

<b>NAME:</b>	<b>CONTACT:</b>
<b>PHONE:</b>	<b>FAX:</b>

### Bank Reference:

<b>NAME:</b>	<b>CONTACT:</b>
<b>PHONE:</b>	<b>FAX:</b>
	<b>ACCOUNT NUMBER:</b>

### Terms:

All initial account activity will be C.O.D. Customers with approved credit will be billed. Terms are Net 30 days from date of invoice. All accounts over 30 days are subject to a 1.5% monthly service charge. Accounts inactive for a period of one year can be automatically closed without notification.

Applicant's signature attests financial responsibility, ability, and willingness to pay all invoices in accordance with the terms contained herein. Additionally, it attests acceptance of all High Output, Inc.'s Terms and Conditions. Applicant agrees to pay all reasonable attorney fees plus court costs and interest in case of default in payments in compliance with our terms.

<b>PRINTED NAME:</b>	<b>TITLE:</b>
<b>SIGNATURE (MUST BE OWNER, PARTNER OR OFFICER):</b>	<b>DATE:</b>

<b>For Office Use Only:</b>		
<b>Rental/Sales Agent</b>	<b>Reception</b>	<b>Accounting</b>
Form Sent By: _____	Date Received: _____	Approved By: _____
Credit Code: _____	On ESTA Report: _____	Credit Limit: _____
First Job Date: _____	Letter Sent: _____	