



STAR-BOX, INC.
ON TIME | ON DEMAND

CREDIT APPLICATION

Newport Beach, CA 92659
Credit Tel. 562-283-3500 Credit Fax 562-283-3502
info@starboxinc.com www.starboxinc.com

Company name: (Applicant) _____

DBA/ Trade name _____

Corporate description: Check one below _____ Date/State established as legal entity _____

Corporation Partnership Limited Liability Proprietorship

Billing Address: _____ Physical Address: _____

Telephone : (_____) _____

Fax : (_____) _____

Ownership/Officers/Business Information (Ownership Required)

Name: _____ Title _____ Owns%: _____

Name: _____ Title _____ Owns% _____

Name: _____ Title _____ Owns% _____

Name: _____ Title _____ Owns% _____

Tax Payer ID Number (F.E.I.D.): _____ Annual Sales:\$ _____

A/P Contact Name: _____ A/P Phone: (_____) _____

Bank References

Primary Bank: _____ Secondary Bank: _____

Account# _____ Account# _____

Contact: _____ Contact: _____

Phone: _____ Phone: _____

Trade References

1) Name: _____ 2) Name: _____
Phone: _____ Phone: _____
City/State _____ City/State: _____

3) Name: _____ 4) Name: _____
Phone: _____ Phone: _____
City/State _____ City/State: _____

5) Name: _____ 6) Name: _____
Phone: _____ Phone: _____
City/State _____ City/State: _____

The below Agent's signature attests the Applicant's financial responsibility, ability and willingness to pay our invoices in accordance with our terms. The Applicant grants permission to Star-box, Inc., its affiliates and its agent, New York Credit, Inc., to obtain credit information, deposit, demand, investment, borrowing, historical relationship and financial and financial covenants from consumer/commercial credit reporting agencies and the above listed bank and trade references for the purposes of determining creditworthiness. The Applicant also attests to its financial solvency of its ability to pay its debts as they are due and it currently maintains a balanced financial condition.

Agent Name _____ Signature _____ Date _____

The Agent signing this agreement has the authority to bind the Applicant and is authorized by Applicant to enter into the credit application terms and conditions. The Applicant agrees to pay interest; collection and attorney/legal fees upon default of any obligation, in addition to, Star-box, Inc. may apply an interest charge at the rate of one and one half percent (1.5%) per month compounding or the highest rate permitted by law on the unpaid total balance and \$30 return fee on each dishonored payment.

Please return to the Credit Office fax 562-283-3502 or Email info@starboxinc.com