



Eclipse Distributing Dealer Credit Application

Please complete the following application thoroughly. Credit terms considered after receipt of completed application.

COMPANY INFORMATION

Name of Company _____ Referred by _____
 Billing Address _____ City _____ State _____ ZIP _____
 Shipping Address _____ City _____ State _____ ZIP _____
 Telephone # _____ Fax # _____
 Approx. Gross Annual Sales \$ _____ Date Business Established _____
 Ownership Type: ___ Corporation ___ LLC ___ Partnership ___ Proprietorship Federal Tax ID # _____
 Name(s) of Owners/Principals/Shareholders
 Name _____ Title _____ S.S. # _____
 Home Address _____ Phone # _____
 Name _____ Title _____ S.S. # _____
 Home Address _____ Phone # _____
 Accounts Payable Contact _____ Email Address _____
 Sales / Promo Contact _____ Email Address _____

BANK REFERENCE

Bank Name _____ Type of Account _____
 Address _____ City _____ State _____ ZIP _____
 Contact Person _____ Phone # _____
 Savings Account # _____ Checking Account # _____

TRADE REFERENCES

Name of Company _____
 Street Address _____ City _____ State _____ ZIP _____
 Business Phone # _____ Business Fax # _____
 Name of Company _____
 Street Address _____ City _____ State _____ ZIP _____
 Business Phone # _____ Business Fax # _____
 Name of Company _____
 Street Address _____ City _____ State _____ ZIP _____
 Business Phone # _____ Business Fax # _____

SECURITY & GUARANTEE

I, _____, residing at _____, for and in consideration of your extending credit at my request to _____ (hereinafter referred to as the "Company"), of which I am authorized as its _____ (owner/shareholder), hereby personally guarantee payment to ecensys, LLC dba Eclipse Distributing of Grand Rapids in the state of Michigan for any obligation of the Company and hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guarantee shall be continuing and irrevocable guarantee and indemnity for such indebtedness of the Company. I do hereby waive notice of default, non-payment, and notice thereof and consent to any modification or renewal of credit agreement hereby guaranteed. In the event of default I hereby consent to legal action against me to be conducted in the state of Michigan in a court of law in the county of Kent.

Date _____ Signature _____ Credit Desired _____

When completed, please Fax to **616-301-2061** or email to **sales@eclipsedistributing.com**



Sales and Use Tax Blanket Exemption Certificate

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from:

_____ (Vendor's name)

and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase, or both, as shown hereon:

Purchaser must state a valid reason for claiming exception or exemption.

Purchaser's name

Street address

City, state, ZIP code

Signature Title

Date signed

Vendor's license number, if any

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either rule 5703-9-10 or 5703-9-25 of the Administrative Code. This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with rule 5703-9-14 of the Administrative Code.