CREDIT APPLICATION



	AL ("DLIVEDID			
Contact Name:			_ Business	S Phone:
Contact Email:			_ CIG Sal	es Rep:
Company Website:			_ Mobile	Phone:
Email y	our completed f	orm to cred	itapplicat	ion@cloverimaging.com
	\$			
		Amount of Cred	dit Requeste	ed
	PRIN	ICIPLE BANK	INFORMA	TION
Bank Name:				
Bank Address:				
Bank City:		_ Bank State	:	Bank Zip:
Bank Phone:		_ BUYER's Pr	rimary Acco	ount Number:
	contact informatio		credit refer	RENCES rences in the office supply industry.
City:		State: _		Zip:
Phone:	Email:			BUYER's Account No.:
Deference 2:				
				Zip:
Phone:	Email:			BUYER's Account No.:
Reference 3:				
Company Name:			. Address:	
City:		State: _		Zip:
Phone:	Email:			BUYER's Account No.:

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TAX EXEMPT STATUS

Check here if you are claiming tax exempt status, and complete and return the Uniform Sales and Use Tax Exemption/Resale Certificate - Multijurisdictional, available from your sales rep. or online at www.mtc.gov/Resources/Uniform-Sales-Use-Tax-Exemption-Certificate

CREDIT TERMS AND CONDITIONS

THIS SECTION MUST BE REVIEWED AND COMPLETED BY AN INDIVIDUAL HAVING LEGAL AUTHORITY TO BIND THE BUYER WITH RESPECT TO THE MATTERS CONTAINED HEREIN.

BUYER is requesting credit from Clover Imaging.

BUYER agrees to pay for all purchases according to these terms and conditions, which may be amended from time to time by Clover Imaging. No terms or conditions of purchase orders different from the terms of Clover Imaging will become part of any agreement between the parties. BUYER agrees to continued solvency as a precondition of any sale made by Clover Imaging.

Clover Imaging accepts and encourages payment by credit card (VISA, MasterCard, Discover Card or American Express) at the time of sale. Credit terms are also available to those who qualify. For BUYERS that have been granted credit terms, Clover Imaging accepts payment via ACH, wire transfer, or check. BUYERS that have been granted credit terms wishing to pay by credit card will be charged a convenience fee in an amount that will be clearly disclosed to BUYER before being assessed.

Remit Address: Clover Imaging, PO Box 775576, Chicago, IL 60677-5576

FedEx Overnight: PNC Bank C/O Clover Imaging

Attn: Lockbox Number # 775576, 350 East Devon Ave, Itasca, IL 60143

If credit is extended, BUYER agrees to pay all debts incurred within the agreed-upon terms of sale. If BUYER'S debt should become past due, BUYER expressly agrees (subject to statutory regulations) to pay finance charges on the past due amounts at the rate of 1.5% per month (18% annualized) provided that no provision of this agreement requires or permits the collection of finance charges in excess of the maximum amount permitted by law. BUYER agrees to pay reasonable collection costs and attorney's fees incurred by Clover Imaging to collect past due balances. In connection with BUYER'S application to purchase product from Clover Imaging, BUYER understands that investigative background inquiries will be made, and BUYER hereby authorizes Clover Imaging or its agent to investigate BUYER'S credit and financial records, including bank records.

If Clover Imaging reasonably believes that BUYER's credit-worthiness has become impaired, or if BUYER defaults in any payment owed to Clover Imaging as a result of credit previously extended by Clover Imaging, Clover Imaging may, in addition to all other legal rights it may have, cancel or suspend any order not yet delivered to a carrier and may stop or recall any shipment of goods then in transit. Any such cancellation, suspension, stoppage or recall of such order or shipment by Clover Imaging shall be without liability to BUYER or any third party. Credit is granted to customers who provide satisfactory trade and banking references. For higher lines of credit, financial statements and/or personal guarantees may be required. Past due invoices for sales that exceed credit lines may delay current shipping requests. Clover Imaging's standard payment terms are Net 30.

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EXECUTION AND SIGNATURE

I swear or affirm that I am an authorized agent of BUYER and that the information on this form is true and correct as to every material matter.

I hereby authorize Clover Imaging to charge BUYER's credit card if credit card information is given for any transaction.

I have read and on behalf of BUYER agree to the Credit Terms and Conditions set form above.

Authorized Agent Signature:	
Authorized Agent Name:	
Authorized Agent Title:	Date:
OF	FICE USE ONLY
Signature:	Date:
Signature:	Date:
Terms:	Credit Limit: