



830 KIPLING • SUITE 300
LAKEWOOD, CO 80215-5826
303/238-2323 • 303/238-0405

CREDIT APPLICATION

Date _____
Maximum credit applied for:
\$ _____

Thank you for choosing Colorline for your graphic and prepress needs. We appreciate your cooperation in completing this application which will enable us to serve you better. Please mail or FAX this SIGNED form to us. We will process it as quickly as possible and get back with you.

COMPANY INFORMATION (Please Print or Type)

Your Company Name: _____

Billing Address _____

City _____ State _____ Zip _____ Phone (Billing) _____

Type of business: _____

Years in Business _____ Corporation Partnership Proprietorship Other _____

Names of Officers or Owners of Company

1. _____
2. _____
3. _____
4. _____

Persons Authorized to Charge on this Account

1. _____
2. _____
3. _____

Purchase Orders Required to Charge on Account? YES NO

BANK REFERENCE

Bank Name: _____

Address _____ Phone _____

Bank Officer (name): _____ Title: _____

TRADE REFERENCES (Please List Three)

- | | | |
|---|---|---|
| 1. _____
<small>Company Name</small> | 2. _____
<small>Company Name</small> | 3. _____
<small>Company Name</small> |
| _____ | _____ | _____ |
| <small>Address</small> | <small>Address</small> | <small>Address</small> |
| _____ | _____ | _____ |
| <small>City, State, Zip</small> | <small>City, State, Zip</small> | <small>City, State, Zip</small> |
| _____ | _____ | _____ |
| <small>Telephone</small> | <small>Telephone</small> | <small>Telephone</small> |

CREDIT DEPARTMENT USE ONLY

Length of time 1. _____	2. _____	3. _____	Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO
High credit _____	_____	_____	Credit Limit \$ _____
Terms _____	_____	_____	Terms _____
Pays when due _____	_____	_____	Authorized by: _____
Comments _____	_____	_____	Date _____

If credit is extended to you or your company by Colorline Photographics, all charges will be due and payable according to the terms granted.

The undersigned individual, to induce the granting of credit to the company, hereby personally guarantees payment of any amount of credit extended by Colorline Photographics. This guarantee is absolute and unconditional.

PERSONAL GUARANTEE WAIVED _____

A 1.5% monthly late payment penalty will be assessed on all overdue charges. Buyer will be responsible for all legal expense and costs of collection of any past due amounts.

Name of Company _____

By (signed) _____

Individually and as an Officer of the Company

(printed) _____