



### Credit Application and Agreement

#### Requested Credit Terms

Credit Card   
 Net 30   
 Requested Credit Limit \$ \_\_\_\_\_  
 Resale  Tax Exempt

*Must provide current exemption certificate.*

Corporation  Incorporated in the last 12 months

Public  Trading symbol \_\_\_\_\_

Partnership  Sole Proprietorship

Legal Business Name	Business Trade Name
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Billing Address
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City	State	Zip
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Web address
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Date Established	Telephone	Fax	Accounts Payable Contact
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Require PO?	# Employees	Federal Tax ID
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#### Principal Owners and Officers

Name	Title
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Name	Title
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#### Parent Company Information

Name	Address
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#### Trade References or attach preprinted information

Name of Company	Account #	Telephone	Contact Person
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Payment Terms	Date Account Established	Fax	Monthly Volume
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Name of Company	Account #	Telephone	Contact Person
-----------------	-----------	-----------	----------------

Payment Terms	Date Account Established	Fax	Monthly Volume
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Name of Company	Account #	Telephone	Contact Person
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Payment Terms	Date Account Established	Fax	Monthly Volume
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#### Terms and Conditions

Terms: Net 30 balances to be paid by check, wire or ACH. Credit Card (American Express, Mastercard, Visa) to be charged at the time of shipment.

Warranty: Only manufacturers' warranties apply through authorized service centers.

Returns: No merchandise can be returned without authorization (RMA) regardless of the source of error E-mail customer service at csg@trox.com or call 602-437-7240. Authorized returns will be charged a minimum 25% restock fee. No returns for special order, marked or engraved items. Any returns must be new and in original, unblemished packaging.

Cancellations and Changes: Must be in writing and are subject to seller's approval.

#### Credit Agreement

The Seller, in reliance upon the statements and representations contained in this Credit Application and Agreement, may extend credit to the applicant company named in this agreement for the purchase of products and services. If credit is extended, the applicant company agrees to the following:

1. To pay all invoices when due, according to the terms of sale listed on each invoice.
2. That all past due invoices are subject to a finance fee equal to the legal rate of interest.
3. To pay all collection fees, reasonable attorney fees, court costs and other expenses incurred by the Seller to effect recovery of sums due from the applicant company in the event of non-payment.

I understand that completion of this application does not guarantee credit approval. I certify that the above information is true and correct and that I can and will comply with the stated terms and conditions. By signing this application, I also give approval for Troxell Communicatons, Inc. or Summit Integration Systems to perform credit inquiries with listed trade/banking references and parent or associated companies.

Officer's Printed Name and Title	Officer's Signature	Date
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#### For Internal Use Only

Approved by:	Approved amount:	Date
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Notes:
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### BANK RELEASE

Due to regulations in the banking industry for credit information, banks are now requiring written authorization from their depositors for the release of any information in regards to their customer's accounts. Please sign this authorization for your bank and return it with your completed credit application. Please keep in mind, all information will be kept in strict confidence.

Thank you.

### AUTHORIZATION

I give my permission for the release of any information about my account as required on the attached bank credit reference inquiry.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Signature *(must be an authorized signer)*

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Bank

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Bank's Phone Number

\_\_\_\_\_  
Bank's Street Address

\_\_\_\_\_  
Bank's Fax Number

\_\_\_\_\_  
Bank's City

\_\_\_\_\_  
Bank's State

\_\_\_\_\_  
Bank's Zip Code