

WEST COAST OFFICE

COOLLID CORPORATION
7545 Irvine Center Drive
Suite 200
Irvine, California 92618
(877) 98-Coollid (982-6655)
Order@Coollid.com
Fax: 1-800-655-5148



WEST COAST FULFILLMENT CENTER

COOLLID CORPORATION
10825 7th Street
Suite C
Rancho Cucamonga, CA 91730
(909) 480-1800
Order@Coollid.com
Fax: 1-800-655-5148

CUSTOMER CREDIT APPLICATION

DATE: _____ OPENING DATE: _____ SALES REP: _____ CUSTOMER ID: _____

COMPANY NAME _____ DBA (IF DIFFERENT) _____

BILL TO ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

CONTACT _____ TITLE _____ RECEIVING HOURS _____

SHIP TO ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

OTHER DIVISIONS (ADDRESSES) _____ AMOUNT OF CREDIT REQUESTED _____

ACCOUNTS PAYABLE PHONE NUMBER _____ FAX NUMBER _____ ACCOUNTS PAYABLE EMAIL ADDRESS _____

TYPE OF BUSINESS _____ DATE ESTABLISHED _____ FEDERAL ID NUMBER _____

CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP LIMITED LIABILITY COMPANY

Are you Sales tax exempt? Yes No (IF YES PLEASE COMPLETE THE RESALE CARD ATTACHED)

Have you ever had credit with us before? Yes No

U.S. RESALE # _____

CANADA RESALE # _____

TRADE REFERENCES _____ DUN# _____

NAME	ADDRESS	PHONE NUMBER	FAX/EMAIL ADDRESS
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____
4 _____	_____	_____	_____

I represent that the above information is true and is given to extend credit to the applicant. My company and I authorize credit investigation as Coollid Corporation sees fit, including contacting the above trade references and obtaining credit reports. My Company and I authorize all trade references, and credit reporting agencies to disclose to Coollid Corporation any and all information concerning the financial and credit history of my company and my self.

We understand that the terms of sale require payment on or before the DUE DATE and agree to meet those terms. Delinquent invoices are subject to a late fee of 2% per month on the outstanding balance. All invoices are payable at 7545 Irvine Center Dr Suite 200 Irvine CA 9218 Applicant agrees that it shall be liable for and pay all of Coollid Corporation attorney's fees (including local counsel fees) experts fees, accountants fees, court fees, collection costs, collection agency fees (if applicable) and any other expenses, whether or not incurred in connection with the enforcement of any of the terms of this application or resulting from default by Applicant, and/or in connection with the enforcement of any judgement or award rendered in favor Ernest Packaging Solutions in connection herewith. This agreement shall be interpreted under the laws of the State of California. Venue for any action brought by Coollid Corporation to enforce any terms of this agreement, shall be in orange county at the sole option of Coollid Corporation.

I have read the terms and conditions stated above and agree to all of these terms and conditions "INCLUDING TAX EXEMPT RESALE FORM."

AUTHORIZED SIGNATURE _____ PRINTED NAME _____

TITLE _____ DATE _____

Submit