

# Goleta Valley Paint

325 Rutherford Street Goleta CA 93117-3785 - Voice: (805) 964-8787 - Fax: (805) 964-1249

## CONFIDENTIAL CONSUMER CREDIT APPLICATION

Last Name \_\_\_\_\_ Middle \_\_\_\_\_ First \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Rent or Own \_\_\_\_\_ How Long \_\_\_\_\_

E-mail Address \_\_\_\_\_

Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver License # \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Position Held \_\_\_\_\_ How Long? \_\_\_\_\_ Monthly Income \_\_\_\_\_

Previous Employer \_\_\_\_\_ How Long \_\_\_\_\_ Phone \_\_\_\_\_

If you wish us to use your spouse's credit history in determining credit eligibility :

Spouse's Name \_\_\_\_\_ Social Security: \_\_\_\_\_ Drivers License# \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Position Held \_\_\_\_\_ How Long? \_\_\_\_\_ Monthly Income \_\_\_\_\_

Previous Employer \_\_\_\_\_ How Long? \_\_\_\_\_ Phone \_\_\_\_\_

Other Income and Source (Explain) \_\_\_\_\_

## BANK ACCOUNT INFORMATION

Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Checking Acct. # \_\_\_\_\_ Savings Acct. # \_\_\_\_\_ Money Market/Other \_\_\_\_\_

## CREDIT REFERENCES

1. Company Name \_\_\_\_\_ Account # \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

2. Company Name \_\_\_\_\_ Account # \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

3. Company Name \_\_\_\_\_ Account # \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

CREDIT CARD REFERENCES

Card Name (Visa, M/C, etc.) \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

OTHER

Who is authorized to sign on your account? \_\_\_\_\_

Do You Use Purchase Orders? \_\_\_\_\_ Job Names? \_\_\_\_\_ Resale #? \_\_\_\_\_

By signing, I (we) ask that an account be opened for myself/company. In the event an account is opened for myself/company, I (we) agree to the following terms and conditions:

1. INVOICE TERMS: Net 30 Days.
2. LATE CHARGES: 1.5% per month or maximum allowable rate. Minimum of \$.50 per month.
3. ACCELERATION CLAUSE: If the account becomes delinquent, creditor reserves the right to accelerate and demand payment of the balance in full, together with all accrued interest, late charges and costs of collection.
4. COLLECTION FEES: In the event of default, I (we) agree to pay all reasonable attorney's fees and/or costs incurred by creditor to collect all amounts due.
5. AUTHORIZED BUYERS: I (we) agree to be responsible for all purchases made to this account by the authorized buyers above named and subsequently authorized by us unless I (we) have notified you/creditor in writing, that said parties are no longer authorized to charge to said account.
6. AUTHORIZATION TO CHECK CREDIT HISTORY: It is understood that an investigation of my references and credit history will be conducted, including information from the credit reporting agencies.

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_ CoApplicantSignature \_\_\_\_\_