



APPLICATION FOR CREDIT

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Contact: _____

Individual: _____ Partnership: _____ Corporation: _____

Principals: _____

Corporation Officers: _____

Company Name: _____

Bill to Address: _____ City: _____ State: _____ Zip: _____

Ship to Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Purchasing Agent: _____

Sales Tax # _____

Bank Name: _____ Branch: _____ Type Acct: _____

REFERENCES:

1. Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Contact: _____

2. Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Contact: _____

3. Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Contact: _____

TERMS: ALL ACCOUNTS ARE PAST DUE 30 DAYS AFTER DATE OF BILLING

For Volterra Architectural Products LLC to extend credit I/we agree to pay by the 10th of the month following purchases. In the event our account becomes 30 days delinquent, and in the opinion of Volterra Architectural Products LLC legal action must be instituted to make collections, I/we agree to pay reasonable attorney and court fees. Delinquent accounts will accrue interest at a rate of 1% per month. It is further agreed that if any material is unsatisfactory we reserve the right to return it for full credit, but at no time will Volterra Architectural Products LLC liability exceed the purchase of the product. This waiver is made to induce the best possible price as governed by current market conditions.

Authorized Signature: _____ Print Name: _____

Date: _____ Title: _____