

Innovative Multimedia Inc.

Innovative Multimedia, Inc. | 5623 NW 74th Avenue, Miami, FL 33166

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NEW ACCOUNT INPUT AND CREDIT APPLICATION

B I L L T O	NAME			ACCOUNT NUMBER
	ADDRESS		TELEPHONE NUMBER	
	CITY/STATE/ZIP		FAX NUMBER	
	PURCHASING CONTACT NAME & TITLE		ACCOUNTS PAYABLE CONTACT NAME AND TITLE	
S H I P T O	<input type="checkbox"/> CHECK IF SAME AS "BILL TO"			FEDERAL ID OR SOCIAL SECURITY NUMBER
	NAME		TYPE OF BUSINESS	
	ADDRESS		SIC CODE	YEARS IN BUSINESS
	CITY/STATE/ZIP		<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION IN THE STATE OF:	
REGISTERED AGENTS NAME AND ADDRESS				
<input type="checkbox"/> TAXABLE <input type="checkbox"/> NON-TAXABLE Copy of Annual Resale Certificate (Form DR-13) must be provided or state sales tax will be charged.				
NAMES AND ADDRESS OF OWNERS, PARTNERS, OR CORPORATE OFFICERS:				
NAME OF PRINCIPALS		RESIDENTIAL STREET ADDRESS	CITY/STATE/ZIP	SOCIAL SECURITY NO.
BUSINESS REFERENCE - PRINCIPAL SUPPLIERS				
COMPANY NAME	ADDRESS/CITY/STATE/ZIP		PHONE NO.	FAX NO.
COMPANY NAME	ADDRESS/CITY/STATE/ZIP		PHONE NO.	FAX NO.
COMPANY NAME	ADDRESS/CITY/STATE/ZIP		PHONE NO.	FAX NO.
ESTIMATED ANNUAL SALES		NUMBER OF EMPLOYEES	YEARS AT CURRENT ADDRESS	
DUN & BRADSTREET LISTED		RATING	D-U-N-S NUMBER	
YES	NO			
BANK REFERENCE				
NAME	ADDRESS/CITY/STATE/ZIP		PHONE NO.	ACCOUNT NO.
CREDIT LIMIT DESIRED: \$		PURCHASE ORDER REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		
<p>In consideration of, and in order to induce you to establish an open account line of credit based on the foregoing application, the undersigned promises to pay for monthly purchases in accordance with terms of sale. Terms are: NET 30 DAYS AFTER INVOICE DATE. It is understood that no further credit will be extended if these terms are not kept. If materials are not paid and Vendor engages an attorney to enforce the collection, I/we agree to pay all expenses and costs of litigation including court costs and a reasonable attorney fees to be fixed by any court in which said attorney is required to appear, and further agrees that court action will occur in Miami-Dade County, Florida.</p> <p>The information I/we have provided is for the purpose of obtaining credit and is warranted to be true.</p> <p>All past due accounts are subject to a finance charge of 1 ½% per month, 18% per annum or the maximum amount permitted under state and federal laws. Applicant authorizes the above company to obtain credit and financial information about applicant at any time and from any source.</p>				
APPLICANT SIGNATURE		DATE	APPROVAL	DATE