



Proven Results in Solving  
Complex Label Needs

## Advanced Barcode & Label Technologies, Inc. Credit Application

Company Name: \_\_\_\_\_ Duns Number: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

A/P Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
A/P E-Mail Address: \_\_\_\_\_

Annual Sales: \_\_\_\_\_ Dated Started: \_\_\_\_\_  
Credit Limit Requested: \_\_\_\_\_ # of Employees: \_\_\_\_\_  
A/R Balance: \_\_\_\_\_ Cash on Hand: \_\_\_\_\_  
A/P Balance: \_\_\_\_\_ Net Worth: \_\_\_\_\_

Please check only one (1) that applies to your business:

\_\_\_: Corporation Privately Held\*    \_\_\_: Sole Proprietorship\*  
\_\_\_: Corporation Publicly Held    \_\_\_: Partnership\*

\*If a Sole Proprietorship or Privately Held Corporation please complete the Owner(s) Major Stockholder(s) information below:

_____ (First Name) (Int) (Last Name)	_____ (First Name) (Int) (Last Name)
_____ (Home address)	_____ (Home address)
_____ (City) (State) (Zip)	_____ (City) (State) (Zip)
Social Security#: _____	Social Security#: _____

Please submit bank and trade references with this completed credit application.

Please complete all portions of the credit application. All information will remain confidential. If credit is granted, Advanced Barcode & Label Technologies, Inc. terms are Net/30. Applicant's signature certifies that the above information is correct. As part of the application for credit, you grant us permission to contact commercial credit reporting agencies, bank and trade references as necessary.

If account is placed with an attorney, applicant agrees to pay all attorney fees and court costs, regardless of whether a lawsuit is filed.

\_\_\_\_\_  
(Signed) (Title) (Date)

Salesperson: **RD**