

# Spinweel

## Request for Bank References:

Accounts payable authorized personal; \_\_\_\_\_

Date: \_\_\_\_\_

Customer name: \_\_\_\_\_

Address: \_\_\_\_\_

City/ State: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Please be kind enough to supply the following information. Be assured that the information provided will be held in the strictest confidence.

## CHECKING INFORMATION

Account opened \_\_\_\_\_

Average Balance \_\_\_\_\_

NSF'S/ RETURNS \_\_\_\_\_

Comments:

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## Loan or Line of Credit Information:

Account opened: \_\_\_\_\_

High Credit: \_\_\_\_\_

Amount owing: \_\_\_\_\_

Past due: \_\_\_\_\_

How do they pay: \_\_\_\_\_?

Secured By: \_\_\_\_\_

Comments:

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Thank You for your help and prompt response.

I hereby authorize the above information to be released to Spinweel Inc.

Sincerely,

\_\_\_\_\_  
Credit Manager  
Spinweel Inc

\_\_\_\_\_  
Authorized Signature

**Personal Guaranty**  
**(Read thoroughly)**

In consideration of Spinweel extending credit to the above Applicant, the undersigned does hereby individually and personally guarantee to Spinweel all sums of money as are presently due or may at any time hereafter become due to Spinweel from said Applicant, for goods sold to the applicant. In any action to collect Applicant's debt, the undersigned agrees that the prevailing party shall be entitled to its attorney's fees and court costs. In the event of a legal dispute between the parties, the undersigned hereby consents to exclusive jurisdiction and venue of said disputes in the Courts of the State of California, County of Los Angeles and that California law shall apply. The undersigned agrees to pay to Spinweel all indebtedness now or hereafter owing by the Applicant and it shall not be necessary for Spinweel to first pursue the Applicant for said sums.

Date \_\_\_\_\_

Name of Individual \_\_\_\_\_ (Print)

Signature of Individual \_\_\_\_\_ (signature)

SPINWHEEL INC.  
CREDIT APPLICATION

**Amount of Credit Requested:** \_\_\_\_\_

If the amount of Credit Requested exceeds \$5,000.00, a current financial statement must be submitted.

**Bank Information: (Required for COD Company Check % Open Accounts).**

Bank Contact: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Bank Phone: \_\_\_\_\_ Bank Fax: \_\_\_\_\_

Bank Account # \_\_\_\_\_

Name on Account: \_\_\_\_\_

Date the account was open: \_\_\_\_\_

**Trade References (required for COD Company Check and Open Accounts)**

Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

I am authorized to make this application and certify the above information is true and complete, to the best of my knowledge.

I authorize our bank and vendors to release information needed for the purpose of establishing or credit worthiness. It is agreed that if credit is granted, the method of payment will be met according to the terms on the invoices.

***If payment is not made and our account is referred for collection, I promise to pay all collection costs, attorney's fees and court costs if necessary, to collect any unpaid bills, and agree to pay finance charge of one and one half(1 1/2%) per month, past due monies. (MUST BE SIGNED BY OWNER, PARTNERS, OR PRINCIPAL OFFICER).***

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

\*\*\*ALL SIGNATURES REQUIRED FOR COMPANY CHECK AND OPEN ACCOUNTS\*\*\*

If you are attaching your own company credit application form, this form must be signed for collection agreement.

## **Spinweel Inc.**

### **Credit Request Information**

All three documents must be returned, including a current company financial for lines over \$ 5,000.00.

### **Please fill out the enclosed:**

- Signed Credit application
- Signed Personal Guarantee
- Signed Bank Information Request form for open accounts
- Signed all three pages of Terms & Conditions Agreement

### **Please submit to**

### **Spinweel Inc.**

Po box 1600

Lake forest, CA 92609

(949) 206-0000

Fax (949) 837-9485

[Spinweel@aol.com](mailto:Spinweel@aol.com)

Spinweel.com