

Application not valid until signed & completed in its entirety
Copy of state resale certificate & business license required

Credit Application/Profile

Dealer-USA

How did you hear about Vutec: Advertisement Internet Trade Show Dealer Rep Firm Other _____

Business Name _____ Date _____

Address _____ City _____ State _____

Zip _____ Phone _____ Fax _____

E-mail _____ Web _____

Corporation Partnership Proprietorship Date Established _____ Federal ID# _____

Owner/Officers/Partners _____ Title _____

President _____ Secretary _____

Authorized Buyers 1. _____ 2. _____ 3. _____

Duns# _____ Annual Sales Volume _____ Accounts Payable Contact _____

Tax Exempt # _____ (Attach Certificate) Number of Employees _____

Chain Reseller Commercial A/V Dealer Home Theater Dealer Do you have a showroom? Yes No

Account Type Charge COD Credit Card Credit Line Requested _____

Personally Guaranteed? Yes No By _____

Bank Ref _____ Acct# _____ Contact _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

TRADE REFERENCES (distributor trade references not accepted)

1. Name _____ Acct# _____ Address _____

City _____ State _____ Zip _____ Phone _____ Fax _____

E-mail _____

2. Name _____ Acct# _____ Address _____

City _____ State _____ Zip _____ Phone _____ Fax _____

E-mail _____

3. Name _____ Acct# _____ Address _____

City _____ State _____ Zip _____ Phone _____ Fax _____

E-mail _____

What Projector and Consumer Electronics do you sell? _____

Agreement

Applicant agrees that extension of credit by Vutec Corporation (VUTEC) shall be subject to and in consideration of the following terms and conditions

1. Applicant acknowledges and agrees that all purchases of merchandise from VUTEC made under extension herein applied for shall be subject to terms and conditions of Sale (as revised from time to time)
2. Payment of all amounts due shall be made no later than the due date as indicated on each invoice under the heading TERMS.
3. Amount in default under the "TERMS" set forth in each sale invoice as indicated above will be subject to an 1 1/2 % per month late payment charge. Charges will not to exceed the maximum permissible by law in which the "SALE" was made.
4. Applicant agrees to reimburse VUTEC for cost of collection or attorney's fees incurred collecting any amount owed by the applicant permitted by law.
5. Applicant acknowledges Vutec will make its customary credit investigation and authorizes applicants bank to release information as desired by VUTEC.
6. We hereby indemnify Vutec Corporation and its agents from liability resulting from the credit survey. We understand that terms are net 30 days from shipment.

Print Name _____ Title _____ Date _____

Authorized Signature _____

Please fax completed application w/ signature to (954) 545-9011 or send via email to sales@vutec.com



Vutec Corporation
11711 W. Sample Rd.
Coral Springs, FL 33065-3155
Toll Free Tel: (800) 770-4700 Tel: (954) 545-9000
Toll Free Fax: (800) 548-5885 Fax: (954) 545-9011