



Chiptech, Inc (dba) Vertical Cable: Account Application

Please complete this application and the bank inquiry form and fax it back to Attn: Credit Dept. **951-696-2227**

Company Name _____ URL _____
Address _____
City _____ State _____ ZIP Code _____
Contact Name _____ Title _____ E-mail _____
Telephone No _____ Fax No _____
State Resale Number _____ Federal Tax ID _____

OPERATION PROFILE:

Organization:	Sales Volume:	Others:
Sole Proprietor _____	Last Year _____	Year Established _____
Partnership _____	This Year _____	No. of Employees _____
Corporation _____	Next Year _____	Type of Business _____

TRADE REFERENCES

Company _____
Address _____ City _____
State _____ ZIP Code _____ Phone _____ Fax _____
Acct No _____ Terms _____ Contact _____

Company _____
Address _____ City _____
State _____ ZIP Code _____ Phone _____ Fax _____
Acct No _____ Terms _____ Contact _____

Company _____
Address _____ City _____
State _____ ZIP Code _____ Phone _____ Fax _____
Acct No _____ Terms _____ Contact _____

Upon approval of this application, the undersigned attests financial responsibility and willingness to pay all invoices, past due accounts, and NSF checks owed to Chiptech, Inc (dba) Vertical Cable. In the event of default, the undersigned agrees to pay all costs of collection, including reasonable attorney fees. The undersigned acknowledges that any credit privileges, if granted, may be withdrawn at any time without prior notice.

Signature _____ **Name** _____ **Title** _____ **Date** _____