



**Chiptech, Inc (dba) Vertical Cable: Account Application**

Please complete this application and the bank inquiry form and fax it back to Attn: Credit Dept. **954-454-2167**

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:**

<b>Organization:</b>	<b>Sales Volume:</b>	<b>Others:</b>
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 The undersigned acknowledges that any credit privileges, if granted, may be withdrawn at any time without prior notice.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** \_\_\_\_\_



**BANK CREDIT INQUIRY**

Please fill out this form so that we may submit this information to the bank.

Company Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Tel No \_\_\_\_\_ Fax No \_\_\_\_\_

Bank Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Acct No \_\_\_\_\_

\_\_\_\_\_ Acct No \_\_\_\_\_

Tel No \_\_\_\_\_ Fax No \_\_\_\_\_

I hereby authorize my bank \_\_\_\_\_, to release our bank account information on the account number(s) listed above to Chiptech, Inc (dba) Vertical Cable for credit rating purposes only.

**Signature** \_\_\_\_\_ **Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**FOR BANK USE ONLY**

Dear Bank Officer,

The above company has listed your bank as a credit reference. Please help us make a fair decision by completing this form and returning it by fax at your earliest convenience. We appreciate your assistance in providing the following information. The information will be held strictly confidential. Thank you.

Checking Account No \_\_\_\_\_

Date Account Opened \_\_\_\_\_

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

Current Balance \_\_\_\_\_

Frequency of Returned Checks (NSF) \_\_\_\_\_

Rating \_\_\_\_\_

Comments \_\_\_\_\_

Prepared by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_



FL Office:  
3001 West Hallandale Beach Blvd. Suite A&B  
Pembroke Park, FL 33009  
Tel: 800-749-2447 Fax: 954-454-2167 / Attn: **Accounting**

By signing this document you agree by the Terms as stated on Vertical Cable's website located here:

**Terms and Conditions of Use & Terms and Conditions of Sale**  
[http://verticalcable.com/terms\\_agreement.php](http://verticalcable.com/terms_agreement.php)

**Terms and Conditions of Use**  
<http://verticalcable.com/tou.php>

**Terms and Conditions of Sale**  
<http://verticalcable.com/tos.php>

THE CUSTOMER AGREES TO BE BOUND BY THIS SALE AGREEMENT AND ACCEPTS ITS TERMS AND CONDITIONS (UNLESS THE CUSTOMER HAS SIGNED A SEPARATE FORMAL PURCHASE AGREEMENT WITH Vertical Cable. IN WHICH CASE THE SEPARATE AGREEMENT SHALL GOVERN).

BY VISITING, BROWSING, SHOPPING, ACCESSING OR OTHERWISE USING THIS WEB SITE (THE "SITE") OPERATED BY Vertical Cable. YOU AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS.

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

Company: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

These Terms and Conditions can be changed or altered at anytime without notification.