Sino-American Corporation

120 N. California Ave Citu Of Industry, CA 91746 Tel: 626-820-5588 Fax: 626-820-5589

CREDIT APPLICATION

ompany Name: Date of Application			on:			
Tax I.D. No	Duns #	In Business Since:				
Phone:	Fax:	Web Page:				
Type of Business:Co	orporation (Which State	_) Proprietorship	Others			
Nature of Business:						
Number of Location:	Total Employees:	Annual Sales:				
Street Address:		City:	StateZip			
Billing Address:						
Contact Person/Title:		Phone:_				
Expected Monthly Busine	ess with Sino-American Corpor	ation \$	No. of Shipment:			
Do you have a parent con	npany? YES / NO. If Y	es, provide parent company n	ame and location:			
	OFFICERS A	AND PRINCIPALS	5			
Name:	Title:	Social Security No				
Home Address:		Phone:				
Name:	Title:	Social Security No				
Home Address:		Phome:				

CREDIT REFERENCE

Bank Information:

Bank Name:		Account No		
Bank Address:				
Contact:		Tel:	Fax:	
Please list three	credit reference.			
1.COMPANY N	AME:			
ADDRESS:				
TEL:	FAX:		CONTACT:	
2.COMPANY N	AME:			
ADDRESS:				
TEL:	FAX:		CONTACT:	
3.COMPANY N	AME:			
ADDRESS:				
TEL:	FAX:		CONTACT:	
C) D) E) F) The foregoing de Please sign below	Invoice and/or charges to be paid Credit privileges hereunder will be This agreement. This agreement many time and no damage will accord or any other matter, bills will be Either party has the right to terminal statement to be rendered Any past due amount subject to 29	re suspended for a lay be cancelled a lay be cancelled a lay ure. The uracy of charges paid as rendered and this agreement as requested. The financial charged by:X	any failure to comply with the provisions of at the option of Sino-American Corporation or as to condition, loss, shortage of the goods and claims presented for alleged errors. In tupon written notice.	
Applicant (Company Name)			Date:	
_P P				
Signature and Title Name (Name (Print or Type)		