

Account No (If any)  Please check one:  MasterCard/VISA  COD-Company Check  Net Terms **Order Pending:**  Yes  No

**Requested Credit Limit :** \_\_\_\_\_ **Sales Rep Code:** \_\_\_\_\_

<p>Company or Corporate Name (Exact Legal Name): _____</p> <p>Billing Address: _____</p> <p>Shipping Address: _____</p> <p>Business is a (check one): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship</p> <p>Year Started _____ State of Inc. _____ D&amp;B# _____</p> <p>Are you a: <input type="checkbox"/> subsidiary or <input type="checkbox"/> division (if yes, check which)</p> <p>Parent Company Name: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>A/P Contact Name/Email: _____</p> <p>A/P Phone Number/Email: _____</p>	<p>Doing Business As: _____ Telephone# _____</p> <p>_____ Fax# _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>(check one) <input type="checkbox"/> Principal <input type="checkbox"/> Partner <input type="checkbox"/> Proprietor</p> <p>Name: _____</p> <p>Home Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone _____</p> <p>SSN: _____ Birth date: _____</p> <p>Company Product Type: _____</p> <p>Purchasing Manager Name: _____</p> <p>Phone: _____ Email: _____</p>
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**Companies requesting a credit line of \$10,000 and over must submit copies of their financial statements for the last two years. This information will be for the exclusive use of the Credit Department of IRON Systems, Inc. and will remain confidential.**

<b>BANK REFERENCES</b>	<p>Name: _____ Contact Name: _____ Phone: _____ Date Opened: _____</p> <p>Street Address: _____ City: _____ State: _____ Zip: _____</p> <p>Type of Account: <input type="checkbox"/> Checking No. _____ <input type="checkbox"/> Savings No. _____ <input type="checkbox"/> Loan No. _____</p>
	<p>Name: _____ Contact Name: _____ Phone: _____ Date Opened: _____</p> <p>Street Address: _____ City: _____ State: _____ Zip: _____</p> <p>Type of Account: <input type="checkbox"/> Checking No. _____ <input type="checkbox"/> Savings No. _____ <input type="checkbox"/> Loan No. _____</p>
<b>CREDIT CARD AUTHORIZATION</b>	<p>Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Account No. _____ Exp Date: _____</p> <p>Cardholder's Name (As it appears on card): _____ Phone No: _____</p> <p>Card Billing Address: _____ City: _____ State: _____ Zip: _____</p> <p>I authorize IRON Systems, Inc. (IRON) to charge purchases of product to the above credit card. This authorization will remain in effect until written notice of cancellation is received by IRON.</p> <p>Cardholder's Printed Name: _____ Cardholder's Signature: _____ Date: _____</p>
	<p>Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Account No. _____ Exp Date: _____</p> <p>Cardholder's Name (As it appears on card): _____ Phone No: _____</p> <p>Card Billing Address: _____ City: _____ State: _____ Zip: _____</p> <p>I authorize IRON Systems, Inc. (IRON) to charge purchases of product to the above credit card. This authorization will remain in effect until written notice of cancellation is received by IRON.</p> <p>Cardholder's Printed Name: _____ Cardholder's Signature: _____ Date: _____</p>

**Financial Authorization - TO RELEASE CONFIDENTIAL INFORMATION**

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

To Financial Institution: \_\_\_\_\_ From IRON Customer: \_\_\_\_\_

**ATTENTION: BOOKKEEPING/LOAN DEPARTMENT**

Please accept this as authorization to release the following information to IRON Systems, Inc. (IRON) for the purpose of extending credit.

Checking Acct. No. \_\_\_\_\_ Savings Acct. No. \_\_\_\_\_ Loan No. \_\_\_\_\_ Signature: \_\_\_\_\_

**Please provide credit reference information for three major suppliers:**

<b>CREDIT REFERENCES</b>	Name: _____ Contact Name: _____ Phone/Fax: _____
	Street Address: _____
	City: _____ State: _____ Zip: _____ Account No: _____
	Name: _____ Contact Name: _____ Phone/Fax: _____
	Street Address: _____
	City: _____ State: _____ Zip: _____ Account No: _____
	Name: _____ Contact Name: _____ Phone/Fax: _____
	Street Address: _____
	City: _____ State: _____ Zip: _____ Account No: _____

We hereby agree to the terms of sale listed on each IRON invoice. In case of a credit sale, we agree that IRON may charge a finance fee of one and one-half percent per each thirty day period, or part thereof, for any invoice that is past due. In order to induce IRON to extend credit for the purchase of IRON's products ("Products") and for other good and valuable consideration, we hereby convey, grant and transfer to IRON a purchase money security interest in the Products and all proceeds until we perform all our obligations due to IRON. We agree to execute any financing statements that IRON may request in order to protect IRON's security interest and hereby authorize IRON to execute and irrevocably appoint IRON as our attorney in fact for the execution of such financing statements and for the exercise of its remedies as a secured party. If we are a proprietorship, partnership, or personal guarantor, we authorize IRON to order a consumer credit report in connection with the review of existing and future extensions of credit. We agree that our transactions with IRON shall be governed by and construed in accordance with the laws of the State of California, without giving effect to its conflicts of laws principals. We further agree that any lawsuit between IRON and ourselves shall be brought only in the state or federal courts of Alameda, Santa Clara or San Francisco counties of California. We hereby submit to the jurisdiction of such courts in any dispute with IRON and we waive any objections to venue being in such courts.

\_\_\_\_\_  
Authorized Individual (Print Name) Signature

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

**PERSONAL GUARANTEE**

I \_\_\_\_\_, residing at \_\_\_\_\_  
(print guarantor's name) (guarantor's home address)

for good and valuable consideration, including the extension of credit to the company or companies listed on this application ("Customer") from which I will benefit, do hereby personally guarantee and promise to pay on demand any obligation of Customer to IRON Systems, Inc. without regard for any claim of setoff, counterclaim or defense. I hereby waive notice of sales to Customer, and of the terms thereof, and of non-payment or other default or dispute with Customer. I hereby waive any right to a jury trial and consent to all renewals and modifications of terms of sale or credit. This is a continuing and irrevocable guarantee and I hereby subordinate any indebtedness of Customer to me to that of Customer to IRON Systems, Inc.

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

Please attach personal financial statements of guarantor. SSN: \_\_\_\_\_ Birth date: \_\_\_\_\_

**Credit Department Fax 408-943-8222**

Upon approval of your credit application, contact your IRON sales representative for a password, IRONs online, ordering system. Place orders, check order status, obtain serial and tracking numbers, and much more.