HitechWireless.com CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION			
Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	ZIP Code:
Date business commence	d:		
Sole proprietorship:	Partnership:	Corporation:	Other:
BUSINESS AND CREDIT INFORMATION			
Primary business address:			
City:		State:	ZIP Code:
How long at current address?			
•		E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account	Account number		
Savings			
Checking			
Other			
BUSINESS/TRADE REFERENCES			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
AGREEMENT			
("Applicant"), warrants that all statements on this form are true and correct and are made for the purpose of obtaining credit from HiTechWireless. Applicant authorizes HiTechWireless to request credit information from the references herein listed or from other sources pertaining to Applicant's financial responsibility. Applicant agrees to make payment within thirty days of the billing date on HiTechWireless invoices. Applicant further agrees to pay a late payment penalty of 1.5% per month (18% annually) on any unpaid balance due. The Applicant agrees to indemnify HiTechWireless for all expenses incurred in connection with the collection of amounts payable, including court costs and attorneys' fees. Please fax credit application to (866) 341-3315			
SIGNATURES			
Title: Date:		Title: Date:	