



32861 Calle Perfecto #A  
San Juan Capistrano, CA  
92675 USA

866-474-3278 voice/fax

www.paintbygrids.com

**CREDIT APPLICATION**

**COMPANY INFORMATION**

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

\_\_\_\_\_  
Billing Address

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

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Company Website URL

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Number of Years in Business

\_\_\_\_\_  
President

\_\_\_\_\_  
Resale # and State of Issue

**BANK REFERENCES**

\_\_\_\_\_  
Name of Bank

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Phone Number

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

\_\_\_\_\_  
Savings Account No.

\_\_\_\_\_  
Name of Bank

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Phone Number

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

\_\_\_\_\_  
Savings Account No.

**TRADE REFERENCES**

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

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

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

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

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

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

I (we) authorize the above references to release information to GridArt, LLC. I (we) agree to pay for purchases and/or services within GridArt, LLC's standard NET 30 DAYS. If the account becomes delinquent and/or is considered to be in default, the applicant agrees to pay interest on the outstanding balance at the rate of 1.5% per month. If default should occur, the applicant assumes the liability for all court and legal fees.

\_\_\_\_\_  
Signature Title

\_\_\_\_\_  
Date