

# RICOH ELECTRONICS, INC.

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CORPORATE CREDIT DEPARTMENT

Karen Meadows

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## CREDIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION WHICH WILL BE USED BY RICOH'S CREDIT DEPARTMENT IN EVALUATING YOUR CREDIT FOR OPEN ACCOUNT CONSIDERATION:

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**OFFICERS:** President: \_\_\_\_\_ Vice President: \_\_\_\_\_ Controller: \_\_\_\_\_  
Parent Company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Home Office/Headquarter: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

**Type of Organization:** ☐ Proprietorship ☐ Partnership ☐ Corporation **Amount of Initial Order:** \_\_\_\_\_  
**High Credit Expected:** \_\_\_\_\_ **Resale or Exempt Number:** \_\_\_\_\_  
(Attach Resale Certificate with Credit Application)  
**Date Business Started:** \_\_\_\_\_ **Dun & Bradstreet Rating:** \_\_\_\_\_

### For Proprietorships, Partnerships, Small Corporations, Personal Credit may be considered:

Officer's Name: \_\_\_\_\_ Residence: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Permission Granted to Draw Personal Credit Report Signed: \_\_\_\_\_

### \*\*\* BANK AND TRADE REFERENCES \*\*\*

\*\*\* Please provide FAX numbers for ALL References \*\*\*

Bank Name: \_\_\_\_\_ Officer's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Checking Account #: \_\_\_\_\_ Saving/CD Account #: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

1. Trade Reference Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

2. Trade Reference Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Trade Reference Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

4. Trade Reference Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

As a condition of granting credit, we agree to be bound by your credit terms and pay interest on late payments at 1 1/2% per month, to the extent permitted by law. If any legal action is necessary to collect any past due amounts, the prevailing party shall be entitled to reasonable attorney fees in addition to any other relief to which that party may be entitled. The above bank is hereby authorized to release information to Ricoh for credit purposes.

**Signed:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Typed Name emailed cc = Authorized Signature)