

WWW.HP.COM

Sales Fax #: 866-480-5519

Sales Ph. #: 866-390-1184

Ext:

niranjan.shivashankar@hp.com

INTERNAL USE ONLY

INTERNAL USE ONLY

	INTERNAL USE ONLY
TSR:	

BUSINESS CREDIT APPLICATION

HP Bill-To Account #:

Instructions:

Please complete this application by entering the information requested below. We limit the collection of information about our customers to what we need to know to qualify them for credit. Hewlett-Packard respects your privacy and is committed to protecting it at all times. Please refer to Hewlett-Packard's Privacy Policy, which can be viewed at the following web address: http://welcome.hp.com/country/us/en/privacy.html

Section A Existing Account Information:

If you already have an account with a division of Hewlett-Packard, please enter your HP Bill-To Account # on the top of this application, and verify that the data in SECTION B is correct. If any data other than the Ship-To address is incorrect, please complete a new credit application. If an active account in good standing is confirmed, this may be all that is required to process the application.

Section B Applicant Information:					
BILL TO:		SHIPTO:			
LEGAL COMPANY NAME:		SITE NAME:			
DBA (if applicable):		STREET:	STREET:		
STREET:		CITY:	STATE:	ZIP:	
CITY:	ZIP:	COMPANY WEB DOMAIN	IN ADDRESS:		
PHONE #:	#:	Note: HP will no	ot ship to P.O. Boxes or Fr	eight Forwarders	
FINANCIAL STATEMENTS ARE REQUIRED FOR flow statements. Unaudited financial statements me			st include balance sheet & income s	statements and preferably cash	
AMOUNT OF ORDER \$		ESTIMATED YEAR	ARLY PURCHASES \$		
ACCOUNTS PAYABLE CONTACT:	JMBER & EXTENSION:	ACCOUNTS PAYABLE - EMAIL ADI	DDRESS: ACCOUNTS PAYAB	LE FAX #:	
Section C Business Information: (check	all that apply)				
PUBLIC ENTITY STOCK TICKER SYMBOL:	CORPORATION PA	RTNERSHIP PROPRIET	TORSHIP OTHER: (please spe	ecify) STATE	
TYPE OF BUSINESS OR SIC CODE: DUN & BRADS	TREET DUNS #:	EMPLOYEES: YEAR'S	STARTED IN BUSINESS:	ERAL ID#:	
Section D Bank and Trade Reference Inf	ormation:				
BANK NAME: CITY & STATE	: PHONE #	FAX #:	OFFICER'S NAME:		
TRADE REFERENCE NAME:	PHONE #:	FAX #:	NTACT NAME:		
TRADE REFERENCE NAME:	PHONE #:	FAX #:	NTACT NAME:		
TRADE REFERENCE NAME:	PHONE #:	FAX#:	NTACT NAME:		

Section E TERMS AND CONDITIONS:

MUST BE COMPLETED IN ORDER TO CONSIDER OPEN ACCOUNT TRADE CREDIT TERMS

THIS CREDIT APPLICATION AGREEMENT (HEREINAFTER "APPLICATION" OR "AGREEMENT") IS SUBMITTED BY THE ABOVE-NAMED APPLICANT (HEREINAFTER "APPLICANT"), TO HEWLETT PACKARD COMPANY (HEREINAFTER "HP"), TO OBTAIN TRADE CREDIT. THE APPLICANT ACKNOWLEDGES THAT CREDIT EXTENDED HEREUNDER SHALL BE USED SOLELY FOR BUSINESS PURPOSES. IN MAKING THIS APPLICATION, APPLICANT AGREES AND UNDERSTANDS THAT ALL ACCOUNTS ARE PAYABLE ON OR BEFORE 30 DAYS FROM DATE OF INVOICE. APPLICANT ALSO AGREES TO PAY LATE CHARGES ON ALL AMOUNTS THAT ARE PAST DUE AT THE HIGHEST RATE ALLOWED BY LAW. IF APPLICANT SHOULD DEFAULT ON ANY PAYMENT, HP RESERVES THE RIGHT TO DECLARE ALL INVOICE AMOUNTS DUE AND PAYABLE WITHOUT NOTICE TO APPLICANT. APPLICANT AGREES TO ADHERE TO HEWLETT-PACKARD'S STANDARD TERMS AND CONDITIONS OF SALE AND SERVICE, WHICH CAN BE FOUND ON THE FOLLOWING URL: http://h71016.www7.hp.com/HTML/infodesk/tscs.asp

THIS AGREEMENT SHALL BECOME EFFECTIVE UPON ACCEPTANCE BY HP. APPLICANT AGREES TO PROVIDE HP WITH UPDATED CREDIT INFORMATION ON REQUEST AND WHERE REQUIRED, TO PROVIDE AN ANNUAL FINANCIAL STATEMENT TO HP AS A CONDITION FOR THE CONTINUED EXTENSION OF CREDIT. THIS AGREEMENT IS NOT TRANSFERABLE OR ASSIGNABLE WITHOUT THE PRIOR WRITTEN CONSENT OF HP.

APPLICANT AUTHORIZES APPLICANT'S BANK TO RELEASE ANY INFORMATION NECESSARY TO ASSIST HP IN ESTABLISHING A LINE OF CREDIT. APPLICANT ALSO EXPRESSLY AUTHORIZES HP AND ITS AFFILIATES TO OBTAIN CREDIT REPORTS ON THE APPLICANT BUSINESS FOR USE IN EVALUATING SUCH APPLICATION.

APPLICANT AND APPLICANT'S AUTHORIZED REPRESENTATIVE REPRESENT AND WARRANT THAT THE INFORMATION PROVIDED IN THIS APPLICATION AND IN ANY AND ALL ADDITIONAL DOCUMENTS, FINANCIAL STATEMENTS OR OTHER INFORMATION FURNISHED BY APPLICANT TO HP IS TRUE, CORRECT IN ALL MATERIAL RESPECTS AND CONTAINS ALL INFORMATION NECESSARY SO THAT THIS APPLICATION IS NOT MATERIALLY MISLEADING. APPLICANT ACKNOWLEDGES THAT HP IS RELYING ON THE ACCURACY OF THE INFORMATION PROVIDED. APPLICANT UNDERSTANDS THAT HP MAY REPORT THE PAYMENT HISTORY OF APPLICANT TO CREDIT REPORTING AGENCIES. IN THE EVENT HP SHOULD COMMENCE ANY ACTION OR ACTIONS, OR OTHERWISE SEEK TO ENFORCE THIS AGREEMENT AGAINST APPLICANT OR ANY GUARANTOR, APPLICANT AGREES TO PAY REASONABLE COLLECTION AND ATTORNEY'S FEES AND COURT AND OTHER EXPENSES INCURRED BY HP, WHETHER OR NOT SUIT IS FILED.

THIS AGREEMENT SHALL BE GOVERNED BY AND CONSTRUED IN ACCORDANCE WITH THE LAWS OF THE STATE OF CALIFORNIA WITHOUT REGARD TO CONFLICT OF LAWS PRINCIPLES. VENUE FOR ANY LEGAL ACTION IN CONNECTION WITH THIS APPLICATION SHALL BE THE STATE OF CALIFORNIA, COUNTY OF SANTA CLARA. WHEN REFERENCE IS MADE TO APPLICANT, THE SINGULAR SHALL INCLUDE THE PLURAL AND THE MASCULINE SHALL INCLUDE THE FEMININE.

PLEASE RETAIN A COPY OF THIS APPLICATION FOR YOUR RECORDS. IF YOUR APPLICATION FOR BUSINESS CREDIT IS DENIED, YOU HAVE THE RIGHT TO A WRITTEN STATEMENT OF THE REASONS FOR THE DENIAL. TO OBTAIN THIS STATEMENT, PLEASE SEND YOUR REQUEST IN WRITING TO; HEWLETT-PACKARD COMPANY, ATTENTION CREDIT DEPT., 301 S ROCKRIMMON BLVD, COLORADO SPRINGS, CO 80919 WITHIN 60 DAYS FROM THE DATE YOU ARE NOTIFIED OF OUR DECISION. A WRITTEN STATEMENT WITH THE REASON FOR DENIAL WILL BE SENT WITHIN 30 DAYS OF RECEIVING THE REQUEST. THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT (ECOA) PROHIBITS CREDITORS FROM DISCRIMINATING AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS, AGE (PROVIDED THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT); BECAUSE ALL OR PART OF THE APPLICANT'S INCOME BEING DERIVED FROM PUBLIC ASSISTANCE; OR BECAUSE THE APPLICANT HAS IN GOOD FAITH EXERCISED ANY RIGHT UNDER THE CONSUMER CREDIT PROTECTION ACT. THE FEDERAL AGENCY THAT ADMINISTERS COMPLIANCE WITH THIS LAW IS THE FEDERAL TRADE COMMISSION, EQUAL CREDIT OPPORTUNITY, WASHINGTON, D.C. 20580.

	I HEREBY CERTIFY THAT I AM AUTHORIZED TO SUBMIT THIS APPLICATION ON
_	BEHALF OF APPLICANT, I HAVE READ THE TERMS AND CONDITIONS DESCRIBED
	ABOVE AND APPLICANT AGREES TO SUCH TERMS AND CONDITIONS.

NOTE: IF YOU HAVE SUPPLIED PERSONAL DATA IN CONNECTION WITH OBTAINING A CONSUMER CREDIT REPORT. THE INDIVIDUAL AGREEING TO THE TERMS AND CONDITIONS MUST BE THE INDIVIDUAL SUBMITTING THE PERSONAL DATA. IF THEY ARE NOT, HP WILL BE SENDING AN EMAIL TO THAT INDIVIDUAL, REQUESTING AGREEMENT TO HP'S TERMS AND CONDITIONS, AND AUTHORIZATION TO OBTAIN A CONSUMER CREDIT REPORT. UNTIL THIS AGREEMENT IS RECEIVED, THIS APPLICATION WILL NOT BE PROCESSED.

PRINTED NAME & TITLE OF AUTHORIZED REPRESENTATIVE:	SIGNATURE OF AUTHORIZED REPRESENTATIVE:	DATE:
FAX #:	EMAIL ADDRESS OF AUTHORIZED REPRESENTATIVE:	

Rev. May 2010 AL