



Quality Network Components  
 7191 Sitio Caballero  
 Carlsbad, California  
 92009 USA

714-369-8097 Office  
 714-442-0585 Fax  
 www.quality-netcom.com

### Name / Address

Company Name:		Date:
DBA:		Account Rep:
Billing Address:		
City:	State:	Zip:
Telephone:		Fax:
Shipping Address:		
City:	State:	Zip:

### Company Information

Form of Ownership:    Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/>	
Federal ID Number:	Date Established:
Date Of Incorporation:	Number of Employees:
Annual Sales:	Terms Requested:

### Officer Information

President/CFO:	Phone:
Treasurer:	Phone:
Accounts Payable:	Phone:

### Bank References

Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Contact:	Contact:
Account Number:	Account Number:



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**Trade References** (Please provide Only Active Accounts)

Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Contact:	Contact:
Account Number:	Account Number:

Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Contact:	Contact:
Account Number:	Account Number:

**Credit Certificate**

In order to permit Quality Network Components (QNC) to consider credit terms of sale for purchases made by the undersigned or it's agents, herewith applied for, the undersigned acknowledges that each month, or portion thereof that the same remains unpaid, commencing from and after the date of thereof, should QNC incur attorney's fees with or without the institution of court or arbitration proceedings in connection with the collection of any account due to the undersigned, the undersigned agrees to pay reasonable attorney's fees and all court and arbitration costs in connection with any such proceedings. Buyer also agrees to pay \$20 for each check issued by Buyer to QNC which is returned without payment. In signing this document, Buyer grants permission for credit information to be obtained by QNC from companies the Buyer has specified. The signature below acts as a releasing authority to the companies approached for credit information by QNC. The undersigned understands that QNC will keep this application whether or not this application is approved and that QNC will consider this application as a continuing statement of the undersigned's financial condition until notified otherwise. The information and statements in this application are true and complete, and are made for the purpose of inducing you to establish a line of credit.

Signature (Officer or Owner): \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

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