



# MonarchLitho Inc.

1501 Date Street  
Montebello, CA 90640

Office (323) 727-0300  
Fax (323) 720-1169  
www.monarchlitho.com

## APPLICATION FOR CREDIT

Name of Company or Individual \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

Line of Business \_\_\_\_\_ Fax # \_\_\_\_\_

How long has this business operated? \_\_\_\_\_ How long at present address? \_\_\_\_\_

Names of Principal Officers, Partners or Owners \_\_\_\_\_

Federal Tax-ID or Social Security # \_\_\_\_\_

**IF RESALE, PLEASE SUBMIT A RESALE CARD**  
Please submit a blank Purchase Order from your company

Authorized Buyers \_\_\_\_\_

### Bank References

Bank Name \_\_\_\_\_ Account # \_\_\_\_\_ Contact \_\_\_\_\_

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

### Business References

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

Address \_\_\_\_\_ Fax \_\_\_\_\_

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

Address \_\_\_\_\_ Fax \_\_\_\_\_

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

Address \_\_\_\_\_ Fax \_\_\_\_\_

Completed by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

*I/We will be financially responsible for all invoices submitted by Monarch Litho Inc. and will pay them in accordance with your terms. NET 30 DAYS, unless otherwise noted.*

*I hereby certify that the information in this credit application is correct. The information in this application is for the use of Monarch Litho Inc. and/or it's agents in determining the amount and conditions of credit to be extended. I understand that Monarch Litho may request and obtain consumer credit reports in conjunction with the opening, monitoring, renewal, and extension of credit to my company. Futhermore, I hereby authorize the bank and business references listed in the credit application to release the information necessary to assist Monarch Litho Inc. in establishing a line of credit.*

*We further agree that should it become necessary to file suit to enforce any of the representations, warranties or agreements above, that venue and jurisdiction shall be in the appropriate court in the count of Los Angeles, State of California.*

*A faxed or emailed copy of this credit application will be considered the original.*

Approximate Value of Initial Order \$ \_\_\_\_\_

Sales Representative \_\_\_\_\_