



47929 Fremont Boulevard
 Fremont, CA 94538
 Tel: 510.623.2341
 Fax: 510.623.2342

CREDIT APPLICATION

BNI-US-FR-FI-AR-001-00

***Please fill out the application completely so that credit processing is not delayed ***

GENERAL INFORMATION

Company Legal Name _____ Business Phone No. _____ Business Fax No. _____

Business Address _____ City _____ State _____ Zip _____

Billing Address (If different from above) _____ City _____ State _____ Zip _____

Billing Contact Name _____ Billing Phone No. _____ Billing Fax No. _____

Type of Business: _____ Years in Business _____

Type of Organization: Individual Partnership Corporation Government

Federal ID No.: _____ Est. Annual Revenue: _____ No. of Employees: _____

State Resale No.: _____ Credit Line Desired: _____

Dun & Bradstreet #: _____ Est. Monthly Purchases: _____

Business License No.: _____

BANK / FINANCE COMPANY INFORMATION

Bank Name _____ Address _____ City _____ State _____ Zip _____

Officer to Contact _____ Phone _____ Fax _____ Saving / Check Account _____

Other Bank or Finance Company _____ Address _____ City _____ State _____ Zip _____

Officer to Contact _____ Phone _____ Fax _____ Saving / Check Account _____

TRADE REFERENCES



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Business Name	Address	City	State	Zip
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Contact Person	Phone No. (Required)	Fax No. (Required)	Good Provided
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Business Name	Address	City	State	Zip
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Contact Person	Phone No. (Required)	Fax No. (Required)	Good Provided
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Business Name	Address	City	State	Zip
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Contact Person	Phone No. (Required)	Fax No. (Required)	Good Provided
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Business Name	Address	City	State	Zip
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Contact Person	Phone No. (Required)	Fax No. (Required)	Good Provided
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SIGNATURE

I hereby certify that all the information provided in this application is correct and authorize BiTMICRO NETWORKS, Inc. to verify any listed references. I agree to pay by the terms of sales listed on each BiTMICRO NETWORKS, Inc. Invoice. BiTMICRO NETWORKS, Inc. reserves the right to charge a finance fee of one and one-half (1 1/2%) percent per each thirty day period, or part thereof, for any invoice that is past due. I further agree to pay all collection fees, reasonable attorney fees, court costs and other expenses incurred by BiTMICRO NETWORKS, Inc.

Authorized Signature (Required) _____ Date: _____

Please print name and title _____