



Credit Application

Complete Legal Name of Business

Company Name _____ Db _____ D-U-N-S # _____

Billing Address _____ City _____ County _____ State _____ Zip _____

Nature of Business _____ Contact Person _____ Title _____

Telephone Number _____ Fax Number _____ Number of Years in Business _____ Fed Tax ID Number _____

Ownership Information

Name _____ Title _____ %Ownership _____ Social Security Number _____

Address _____ City _____ State _____ Zip _____ Phone _____

Name _____ Title _____ % Ownership _____ Social Security Number _____

Address _____ City _____ State _____ Zip _____ Phone _____

Company Bank Reference (if less than two years, give previous bank reference)

Bank Name _____ City _____ State _____ Checking Account # _____ Phone _____

Trade References

Company Name _____ City _____ State _____ Telephone # _____ Contact _____

Company Name _____ City _____ State _____ Telephone # _____ Contact _____

Payment Term requested: net 15 days net 30 days on completion

I hereby authorize our banks, and personal credit bureaus to release credit information to RealTime Technology Group, Inc. and/or assignees.

Name _____ **Title** _____ **Date** _____

By signing above, each undersigned individual, who is either a principal of the applicant or a personal guarantor of its obligations, provides written instruction to Lender of its Assignee and certifies that all information provided is true and correct, and authorizes Lender or its assignee(s) to verify any credit information from whatever source it deems necessary and further authorizes Lender or its assignee(s) to investigate the references, statements or other data listed or accompanying this application. The undersigned authorizes all parties contacted including but not limited to any credit reporting agency to release credit and financial information requested by telephone or facsimile. The undersigned further understands that any information obtained now or from time to time will be treated confidentially and will only be used for securing financing or for the purposes of updating, renewing, or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be as valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the above application.

Fax completed application to: 775-255-3044

or

E-mail completed application to: credit@rtglighting.com