WISE STAR

1142 S. Diamond Bar Blvd., #385, Diamond Bar, CA 91765 Tel: 949-259-0828 Fax: 949-627-8028

APPLICATION COMPANY INFORMATION

COMPANY NAME:				PHONE	()	
TRADING AS:				FAX		
ADDRESS:	CITY:				STATE	ZIP:
TYPE OF BUSINESS:				DATE ESTABLISHED		
ANNUAL SALES:	NO. OF EMPLOYEES:		FEDERAL	RAL ID # RE		SALE #
ORGANIZATION FORM PRIPIORERSHIP:	PARTNER	CORPO	PORATION: D&B # _		&B#	
IF LEASE: MANAGEMENT COMPANY				TEL: FAX:		FAX:
		TRADE RE	FERENCE			
1. COMPANY NAME	ADDRESS			CITY	STATE	ZIP CODE
TELEPHONE NO.	FAX NO.	CONTACT		PAYMEN	IT/TERMS	ACCOUNT NO.
2. COMPANY NAME	ADDRESS			CITY	STATE	ZIP CODE
TELEPHONE NO.	FAX NO.	CONTACT		PAYMENT/TERMS		ACCOUNT NO.
3. COMPANY NAME	ADDRESS			CITY	STATE	ZIP CODE
TELEPHONE NO.	FAX NO.	CONTACT		PAYMENT/TERMS		ACCOUNT NO.
In the event of a breach Remedies available in la Be referred for collectio a) the greater of the actibalance and b) actual at balance interest shall be it is understood that all be governed by the laws covenants and agrees the appropriate Court of Lo and all of customer's as	aw or in equity. A ons, the undersign ual cost of collect torneys' fees and e charged at the credit application s of the State of (hat Los Angeles s Angeles Count	Additionally, ned custome tion or a mind costs, if an rate of 1.5% ns are procestalifornia. In County, Californiy, Californy, Cali	should said ber, in addition amount amount amount, incurred. (per month. assed through the event of fornia shall be	oreached o to the amo it of twenty Customer u our credit a law suit e the only	r defaulted ac ounts owing, s r five percent understands t headquarters or other legal proper venue	count(s) shall pay 25% of the principal hat on any unpaid This agreement sha proceeding, custome and that the
CUSTOMER:	: SIGNED BY: _					
DATE:	ntor(s) uncondition of further agrees t	PRIN' onally guara o jurisdiction	T NAME: ntees full pay n and venue i	ment of all n Los Ange	sums due an eles County, (d owing, pursuant to CA personally and in
GUARANTOR:		GU	ARANTOR:			