

# NEW CUSTOMER ACCOUNT APPLICATION



Company:  Contact:   
Office Phone:  Office Fax:   
Email:  Website:   
Street Address:   
City:  State:  Zip Code:   
Date Established:  Sales Tax ID:

Tax Exempt:  Yes (please provide copy of your tax exempt form)  No

Organization Type:  Corporation  LLC  Partnership  Proprietorship  Individual

## INDUSTRY

- Automotive/Racing
- Boat Broker
- Boat Owner
- Boat Industry
- Church, Schools, NPO
- Consumer
- Contractor
- Financial Services
- Fishing Tackle
- Horse
- Industrial Machine
- Medical
- Photography
- Printer Support
- Realtor/Property Mgmt
- Retail
- Service Provider
- Other:

## GRAPHIC NEEDS

- Exhibits & Displays
- Custom Decals
- Posters
- Custom Banners
- Window Graphics
- Vehicle Graphics
- Wall Murals
- Signage
- Other:

## ARE YOU INTERESTED IN CREDIT TERMS?

Yes (Please fill out the second page of this application)  No

Please complete entire form and fax it to **714-429-7983** or email it to your account rep.

# NEW CUSTOMER ACCOUNT APPLICATION



## TRADE REFERENCES

---

Company:  Contact:

Phone:  Fax:

Email:  Done Business With Since:

Street Address:

City:  State:  Zip Code:

---

Company:  Contact:

Phone:  Fax:

Email:  Done Business With Since:

Street Address:

City:  State:  Zip Code:

---

## BANK REFERENCE

---

Bank Name:  Contact:

Phone:  Fax:

Email:

Street Address:

City:  State:  Zip Code:

---

## AGREEMENT

1. All invoices are to be paid within specific terms from the date of the invoice. Customer understands that Design Dynamics will allocate an initial credit limit.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Design Dynamics to make inquiries into the banking and credit references you have supplied regardless whether net terms are approved or not.

Yes     No