

# SPYTOWN

## CREDIT APPLICATION AND GUARANTY

1227 Walt Whitman Road

Melville, NY 11747

Telephone: (866) 779-8696 Fax: (631) 421-8372

Applicant Name \_\_\_\_\_ Federal I.D. # \_\_\_\_\_  
Address \_\_\_\_\_ Telephone # \_\_\_\_\_  
City \_\_\_\_\_ Fax # \_\_\_\_\_

Type of Business [ ] Corporation [ ] Partnership [ ] LLC [ ] Sole Proprietorship  
Years in Business \_\_\_\_\_ Years at Current Location \_\_\_\_\_  
Personal Guarantor \_\_\_\_\_ Title \_\_\_\_\_

### **GUARANTOR/OWNER INFORMATION:**

Name \_\_\_\_\_ Title \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

### **TRADE REFERENCES:**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Account # \_\_\_\_\_

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Account # \_\_\_\_\_

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Account # \_\_\_\_\_

### **BANK REFERENCES:**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Account # \_\_\_\_\_

### **SALES TAX**

WE HAVE A \_\_\_\_\_ STATE RESALE NUMBER. NUMBER \_\_\_\_\_  
**PLEASE ATTACH A COPY - WITHOUT A COPY** STATE \_\_\_\_\_  
**YOU WILL BE CHARGED SALES TAX.**

THE UNDERSIGNED APPLICANT HEREBY AUTHORIZES THE BANK AND EACH OF THE REFERENCES LISTED ABOVE TO FURNISH TO SPYTOWN.COM ALL CREDIT INFORMATION REQUESTED BY SPYTOWN.COM.

IT IS UNDERSTOOD AND AGREED THAT ALL INVOICES ARE DUE WITHIN 30 DAYS. IN THE EVENT OF A DEFAULT IN PAYMENT, APPLICANT AGREES TO PAY ALL REASONABLE COLLECTION FEES, INCLUDING ATTORNEYS' FEES, COLLECTION AGENCY FEES AND OTHER REASONABLE COSTS ASSOCIATED WITH SUCH COLLECTION EFFORTS. THE LAWS OF THE STATE OF NEW YORK SHALL GOVERN THIS AGREEMENT. APPLICANT CONSENTS TO THE JURISDICTION OF THE COURTS OF THE STATE OF NEW YORK, COUNTY OF NASSAU.

Signature of Applicant \_\_\_\_\_ Title \_\_\_\_\_

IN CONSIDERATION OF SPYTOWN.COM EXTENDING CREDIT TO APPLICANT, THE UNDERSIGNED PERSONALLY GUARANTEES AND AGREES TO BE LIABLE FOR THE PAYMENT OF ALL SUMS OWED BY APPLICANT TO SPYTOWN.COM. THE UNDERSIGNED AGREES THAT IN THE EVENT OF A DEFAULT IN PAYMENT, SPYTOWN.COM MAY CHARGE ANY AMOUNTS THEN DUE TO THE FOLLOWING CREDIT CARD ACCOUNT(S). GUARANTOR CONSENTS TO THE JURISDICTION OF THE COURTS OF THE STATE OF NEW YORK, COUNTY OF NASSAU.

MASTER CARD/VISA/AMERICAN EXPRESS \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Circle One

Signature of Guarantor \_\_\_\_\_ Date \_\_\_\_\_

Please Fax Back To SpyTown.com Credit Department (631) 421-8372