



9542 Topanga Canyon Blvd. Chatsworth, CA 91311  
 Phone 661-310-3655 Fax 866-461-0774



**CREDIT APPLICATION**

If a prepared reference sheet is furnish, please be sure to include this signed application acknowledging and agreeing to pay within our payment terms if a credit term is approve.

**Payment terms unless otherwise specified and approved by Group 5 Marketing are net 30 days.**

Be sure to complete and sign the bank credit information release form.

**LEGAL NAME AND ADDRESS**

|                              |                                 |                           |
|------------------------------|---------------------------------|---------------------------|
|                              |                                 |                           |
| <small>BUSINESS NAME</small> | <small>TELEPHONE NUMBER</small> | <small>FAX NUMBER</small> |

|  |
|--|
|  |
| <small>ADDRESS, CITY, STATE AND ZIP CODE</small> |

|                                       |   |                                 |
|---------------------------------------|---|---------------------------------|
|                                       |   |                                 |
| <small>DUN &amp; BRADSTREET #</small> | <small>S.S. OR FEDERAL TAX ID #</small> | <small>SELLERS PERMIT #</small> |

**PRINCIPALS**

|                     |                      |
|---------------------|----------------------|
|                     |                      |
| <small>NAME</small> | <small>TITLE</small> |

|                     |                      |
|---------------------|----------------------|
|                     |                      |
| <small>NAME</small> | <small>TITLE</small> |

OUR BUSINESS IS A: CORPORATION PARTNERSHIP PROPRIETORSHIP

**BUSINESS REFERENCE** Please provide FAX phone numbers for your credit references.

|                     |                                 |                           |
|---------------------|---------------------------------|---------------------------|
|                     |                                 |                           |
| <small>NAME</small> | <small>TELEPHONE NUMBER</small> | <small>FAX NUMBER</small> |

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| <small>ADDRESS, CITY, STATE AND ZIP CODE</small> |

|                     |                                 |                           |
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|                     |                                 |                           |
| <small>NAME</small> | <small>TELEPHONE NUMBER</small> | <small>FAX NUMBER</small> |

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| <small>ADDRESS, CITY, STATE AND ZIP CODE</small> |

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|                     |                                 |                           |
| <small>NAME</small> | <small>TELEPHONE NUMBER</small> | <small>FAX NUMBER</small> |

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| <small>ADDRESS, CITY, STATE AND ZIP CODE</small> |

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|                     |                                 |                           |
| <small>NAME</small> | <small>TELEPHONE NUMBER</small> | <small>FAX NUMBER</small> |

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| <small>ADDRESS, CITY, STATE AND ZIP CODE</small> |

**PERSONAL GUARANTY:** In consideration of Group 5 Marketing, LLC extending credit hereunder, the undersigned, jointly and severally, and unconditionally guarantee to Group 5 Marketing, LLC the prompt and full payment of all sums now or hereinafter-due Group 5 Marketing, LLC from the above named applicant. In addition, the undersigned agree to remain fully bound on this guaranty notwithstanding any extension, forbearance or waiver, or release, discharge or substitution of any collateral of security for the debt. In the event of default, Group 5 Marketing, LLC may seek payment directly from the undersigned without need to proceed first against above named applicant. This guaranty shall be binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives. Past due invoices are subject to 1.5% per month service charge. Choice of Law and Forum. This Agreement has been entered into under the laws of the State of California and the parties hereto agree that it shall be interpreted, and all disputes arising hereunder shall be resolved, in accordance with California law. All disputes arising hereunder shall be heard by a court of competent jurisdiction in the County of Los Angeles, State of California.

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AUTHORIZED SIGNATURE                      PRINT NAME                      TITLE                      DATE



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## BANK CREDIT INFORMATION – RELEASE FORM

On behalf of \_\_\_\_\_  
NAME OF APPLICANT BUSINESS ACCOUNT

I hereby authorized the release of bank account information, as is customarily required for business credit verification, to representatives of **GROUP 5 MARKETING, LLC**

\_\_\_\_\_  
BANK

\_\_\_\_\_  
BRANCH

\_\_\_\_\_  
ACCOUNT NUMBER

\_\_\_\_\_  
BANK TELEPHONE NUMBER

\_\_\_\_\_  
BANK FAX TELEPHONE NUMBER (VERY IMPORTANT)

\_\_\_\_\_  
BANK CONTACT PERSON

\_\_\_\_\_  
APPLICANT AUTHORIZED SIGNATURE (AUTHORIZED FOR RELEASE OF BANKING INFORMATION)

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE



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PH: 661.310.3655  
FX: 866-461-0774

### Credit Card Authorization Form:

|                                |  |
|--------------------------------|--|
| Type of Credit Card (Visa, MC) |  |
| Credit Card Number             |  |
| Credit Card Exp. Date          |  |
| Name on Credit Card            |  |
| Address on Credit Card         |  |
| Name and Position With Company |  |
| Authorized Signature and Date  |  |

#### Important Information

Please note that by signing this form, you are authorizing Group 5 Marketing, LLC/Concept Housewares to apply full payment owed on invoices from (INSERT CO. NAME).

### Reseller Information:

|                             |  |
|-----------------------------|--|
| Reseller Number             |  |
| Federal Tax ID              |  |
| DUNS Number (If applicable) |  |

Please complete this form and fax as soon as possible to 866-461-0774 Attn: Kevin Bahr – Credit Manager

## California Resale Certificate

### I HEREBY CERTIFY:

1. I hold valid seller's permit number: \_\_\_\_\_

2. I am engaged in the business of selling the following type of tangible personal property:

\_\_\_\_\_

3. This certificate is for the purchase from \_\_\_\_\_ of the item(s) I have listed in paragraph 5 below. [Vendor's name]

4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property to be purchased for resale:

6. I have read and understand the following:

**For Your Information:** A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

NAME OF PURCHASER

\_\_\_\_\_

SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTATIVE

\_\_\_\_\_



PRINTED NAME OF PERSON SIGNING

TITLE

ADDRESS OF PURCHASER

\_\_\_\_\_

TELEPHONE NUMBER

(      )

DATE

\_\_\_\_\_