



CREDIT APPLICATION

The following information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Carl Zeiss Vision Inc. to whom this application is made to investigate the reference listed pertaining to my/our credit and financial

DBA \_\_\_\_\_
Type of Business \_\_\_\_\_ Phone # \_\_\_\_\_ Fax# \_\_\_\_\_
A/P Contact \_\_\_\_\_ Ext.# \_\_\_\_\_ Email \_\_\_\_\_
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Shipping Address \_\_\_\_\_

Fed ID# \_\_\_\_\_

Corporation Partnership Sole Owner Limited Partner

Resale Cert # \_\_\_\_\_

Year Business Started \_\_\_\_\_ Estimated Monthly Credit Requirement \_\_\_\_\_ Estimated Monthly Sales \_\_\_\_\_

Principal Owners or Officers

Table with 4 columns: Name, Title, Social Security #, Home Address

Bank Reference

Bank Name \_\_\_\_\_ Address \_\_\_\_\_
Contact \_\_\_\_\_ Phone # \_\_\_\_\_ Fax# \_\_\_\_\_
Acct. No.(s) Checking \_\_\_\_\_ Loan \_\_\_\_\_

Trade References (Please list three (3) including account numbers)

Name \_\_\_\_\_ Address \_\_\_\_\_ Account # \_\_\_\_\_
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Contact \_\_\_\_\_
Name \_\_\_\_\_ Address \_\_\_\_\_ Account # \_\_\_\_\_
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Contact \_\_\_\_\_
Name \_\_\_\_\_ Address \_\_\_\_\_ Account # \_\_\_\_\_
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Contact \_\_\_\_\_

Have you executed uniform commercial code (UCC) documents, guarantees, or other security agreements for organization? If yes, Whom:

Date \_\_\_\_\_ Signature \_\_\_\_\_ Printed Name \_\_\_\_\_
(Must be signed by Owner or Principal Officer of the Corporation)

Salesperson \_\_\_\_\_

PRICING Column [ ]

Applicant's signature attests financial responsibility to pay our invoices in accordance with published terms. Any amounts due and owing for a period of more than thirty (30) days shall be subject to a finance charge of 1% per month (12% per annum), simple interest. Applicant will be responsible for Attorney's fees, court costs and post judgment interest If default litigation occurs. This agreement shall be enforced in accordance with the laws of the state.

STANDARD TERMS OF SALE: Net 30 from date of statement.

Oracle Lens Manufacturing, A Carl Zeiss Vision Company 30 Jefferson Park Rd, Warwick, RI 02888 Phone: (800) 454-3337 Fax: (800) 318-3797

Carl Zeiss Vision Inc. P.O. Box 6006, Petaluma, CA 94955-6006 Phone: (800) 358-8258 Option #4 Fax: (800) 820-4445