



For Internal Use Only:  
 Date Received: \_\_\_\_\_ Approval: Y N  
 Date Processed: \_\_\_\_\_ Account #: \_\_\_\_\_  
 Credit check by: \_\_\_\_\_ Terms: \_\_\_\_\_  
 Sign off by: \_\_\_\_\_ Rep: \_\_\_\_\_

**APPLICATION FOR CREDIT**

<b>Business Legal Name:</b> <hr/> Doing Business As (DBA): <hr/>	<input type="checkbox"/> Corporation, In State of _____ <input type="checkbox"/> Proprietorship <input type="checkbox"/> LTD Partnership <input type="checkbox"/> Partnership
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**Mailing Address:**

Street	City	State	Zip Code	Country
Phone		Fax		

**Delivery Address:** (Only If Different then Mailing. If there are multiple Delivery Addresses, Please attach List.)

Street	City	State	Zip Code	Country
Phone		Fax		

**If Subsidiary: Name & Address of Parent Company?**

Name	Street	City	State	Zip Code	Country
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**Estimated Monthly Purchases?:**

Under \$10,000  
 \$10,000- \$50,000  
 \$50,000-100,000  
 Over \$100,000

**Credit Line Requested?:**  
 \$ \_\_\_\_\_

**Annual Sales Volume: \$** \_\_\_\_\_

**Will Accept First Order C.O.D.?:**

YES  
 NO

**Amount of First Order: \$** \_\_\_\_\_

**Do You Require Purchase Order #'s for your invoicing?:**

YES  
 NO

**Year Established?:** \_\_\_\_\_

**Years at Present Location?** \_\_\_\_\_

Own  
 Rent (Date Lease Expires): \_\_\_\_\_

**D&B #:** \_\_\_\_\_

**Fed ID #:** \_\_\_\_\_



1225 Franklin Avenue - Suite 325  
 Garden City, NY 11530  
 Ph 516.512.8979 Fax 610.956.3040  
[sales@mkmx.com](mailto:sales@mkmx.com) [www.mkmx.com](http://www.mkmx.com)

**OFFICERS, PARTNERS, OWNERS:**

Title	Name	Home Address	City	State	Zip Code	SSN
Title	Name	Home Address	City	State	Zip Code	SSN
Financial Contact/Title			Phone		Fax	
Account Payable Contact			Phone		Fax	

**BANK :**

Bank Name	Address	City	State	Zip Code
Contact	Phone	Account #	Loan # (if applicable)	
2 <sup>nd</sup> Bank Name	Address	City	State	Zip Code
Contact	Phone	Account #	Loan # (if applicable)	

**TRADE REFERENCES: (List Only Firms Which You Buy From On Open Account)**

Name	Contact	Phone	Account #
Address	City	State	Zip Code
Name	Contact	Phone	Account #
Address	City	State	Zip Code
Name	Contact	Phone	Account #
Address	City	State	Zip Code



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## AGREEMENT

This credit application/agreement is submitted by \_\_\_\_\_ (hereinafter referred to as "customer") to MKMx Interactive Designs, Inc. (DBA "MKMx Computer Solutions") for the purpose of obtaining trade credit. The undersigned hereby authorizes MKMx Computer Solutions to make such inquiries as necessary to obtain credit information and authorizes their bank(s) and creditors to the release of information regarding their account(s). Customer agrees to make payment in full to MKMx Computer Solutions for all amounts due as according to MKMx's invoices. Upon failure of customer to pay any indebtedness to MKMx Computer Solutions when due, customer agrees to pay MKMx Computer Solutions as interest, 2% per month, or the maximum provided by law (whichever is less) for invoice amounts that are past due. Should the customer default in any such payments, become bankrupt, or is deemed to be insolvent at any time, MKMx Computer Solutions shall have the right to take action and declare all invoice amounts due and immediately payable. In the event that MKMx Computer Solutions should commence any action(s), or otherwise seek to legally enforce this agreement against customer or guarantor, customer agrees to pay late fees, collection costs, and reasonable attorney fees incurred by MKMx Computer Solutions as a result of this delinquency. Any statement contained in any other document, which is not specifically approved or acknowledged in writing by MKMx Computer Solutions, will not be considered part of this agreement. The above information is certified to be true and correct, and is submitted in support of and as part of, the application for credit herein. This agreement shall become effective upon acceptance by MKMx Computer Solutions.

X \_\_\_\_\_  
 Authorized Signature Printed Name Title Date

## INDIVIDUAL PERSONAL GUARANTEE

I, \_\_\_\_\_ residing at \_\_\_\_\_ for and in consideration of

MKMx Computer Solutions extension of credit at my request to \_\_\_\_\_ (herein after referred to as the "Company"), hereby personally guarantee the payment to MKMx Computer Solutions in the State of New York of any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the company shall fail to pay the same. It is understood that this guarantee shall be a continuing and irrevocable guarantee and indemnity for such indebtedness of the Company. I do hereby waive notice of default, non-payment, and notice hereof and consent to any modification of renewal of the credit agreement hereby guaranteed.

Dated \_\_\_\_\_

X \_\_\_\_\_  
 Signature of Witness Print Name

X \_\_\_\_\_  
 Signature of Guarantor Print Name

## SALES TAX CERTIFICATE (Fill out the below section only if you are a Reseller.)

I, the undersigned, hereby certify that:

- I have been issued a Certificate of Authority by the State of \_\_\_\_\_, # \_\_\_\_\_, to collect State (Enter your Sales Tax Vendor ID Number) and Local taxes and use tax, and that this Certificate of Authority is not expired, been revoked or suspended.

- I am principally engaged in (indicate nature of business) \_\_\_\_\_

- I am purchasing (Check all that apply)

- Tangible personal property for resale in its present form or as a component part of tangible personal property.
- Tangible personal property for use in performing taxable services, and such property will become a component part of the tangible personal property upon which the services will be performed or will be actually transferred to the purchaser of the service in conjunction with the performance of the service.
- Service for resale.

I understand that this certificate may not be used to make tax free purchases of items or services which are not for resale and that I will pay the use tax on tangible personal property or services purchased pursuant to this certificate and subsequently used or consumed by me in a taxable manner. I understand that I will incur tax liabilities, plus penalties and interest, for any misuse of this certificate.

X \_\_\_\_\_  
 Signature of Owner, Partner, Officer of Corporation, etc. Printed Name Title

\_\_\_\_\_  
 Name of Purchaser (Company) Street City State Zip

## TERMS & CONDITIONS

### **Payment Terms**

Cash, Cashier's Check, Wire Transfer, Credit Card, Business Leasing or Approved Credit.

### **COD Policy**

New Customers may make payments COD Company Check for up to \$1000. Any amount over \$1000 must be paid by Cashier's Check. After sufficient Credit Criteria is met, subsequent shipments over \$1000 may be paid by Company Check.

### **Credit Cards Accepted**

VISA, Mastercard, Discover, AMEX

### **Wire Transfer**

Avoid COD Charges by Wire Transferring Funds directly to us:

Ask your MkMx Rep for details...

### **Returned Checks**

All returned Checks will result in a \$20 returned Check fee and automatic status of COD Cashier's Check.

### **Credit Terms**

Credit Terms are granted only to those companies whose credit applications have been processed and approved by our credit department. Terms are N15. There is a 2% Interest charge on all invoices over 15 days. Apply for credit terms by completing and signing our credit application. To expedite your processing, you may **FAX(610)956-3040** your application to our credit department. Normal processing time is between 5-7 days. Please attach financial statements for all requests for credit over \$10,000.

### **Shipping Policy**

All orders placed before 5:00 PM Eastern Time may be shipped the same day (Pending Credit Approval) with the exception of "build to order" items. Any item not in stock will be back ordered. Avoid costly sales tax by providing us with a tax exemption certificate from your state. Without this document on file, you will be charged sales tax for the State of New York.

### **Ordering Information**

Any order below the \$100 minimum order level is subject to a \$5 handling charge. If an order is shipped COD, whatever COD charges are accessed by that carrier are added to your handling fees.

### **Warranties**

Our DOA Policy allows the return of defective products within 10 days of purchase. All defective products that fail past 10 days must be referred to the manufacturer's warranty policy. Contact your MkMx Sales Rep. for an RMA # or for assistance in obtaining an RMA # from a manufacturer.

### **Refused Product**

A 20% Re-Stocking fee will be charged to any product refused.

### **Return Policy**

All returned products must be shipped freight prepaid in its original packaging with all manuals. **( DO NOT WRITE ON BOX!)** You will be charged for any missing or used items. We reserve the right to have our service department call to verify problems prior to any return. All returns MUST have a Return Authorization (RMA) Number assigned by your MkMx Computer Solution Sales Rep. To receive an RMA Number: Call your Sales Rep. with the following information:

- Company Name
- Customer Number
- Invoice Number & Date
- Product Returned & Quantity
- Detailed Description of Problem
- Serial Numbers of product

Please display your RMA Number on the Shipping Label. MkMx will not accept any return without a valid RMA Number. RMA Numbers are valid for 15 days only. MkMx. will refuse any expired RMA Number.