



# GARDEN GROVE NISSAN

<http://www.ggnissan.com>

9222 Trask Ave., Garden Grove Nissan, CA 92844 Tel: (714) 537-0900

## Credit Application Form

Company Name : \_\_\_\_\_

Address : \_\_\_\_\_

Tel No: \_\_\_\_\_ Web site: \_\_\_\_\_

Type of Ownership: [ ] Corporation [ ] LLC [ ] Sole Proprietorship [ ] Partnership

Federal Tax I.D. No: \_\_\_\_\_ Reseller Permit No. \_\_\_\_\_

Annual Sales Volume: \_\_\_\_\_ Date Business Established: \_\_\_\_\_

Length of Time at Present Location: \_\_\_\_ Year(s) \_\_\_\_ Month(s)

Credit Line Desired: \_\_\_\_\_

Owner: \_\_\_\_\_ CEO/CFO: \_\_\_\_\_

Authorized Purchaser: \_\_\_\_\_ Email Address: \_\_\_\_\_

Accounts Payable: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Bank References

Name of Bank: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

Account No: \_\_\_\_\_ Account Type: [ ] Checking [ ] Saving [ ] Loan Date Opened: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

Account No: \_\_\_\_\_ Account Type: [ ] Checking [ ] Saving [ ] Loan Date Opened: \_\_\_\_\_

Address: \_\_\_\_\_

### Trade References

1 Company Name: \_\_\_\_\_ A/C No: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Terms: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

2 Company Name: \_\_\_\_\_ A/C No: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Terms: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

3 Company Name: \_\_\_\_\_ A/C No: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Terms: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

**Note : Please provide a copy of your reseller's permit together with resale certificate form.**



# GARDEN GROVE NISSAN

I/We understand that the information provided is for the purpose of opening an account with Garden Grove Nissan and warrant that the information provided is true and correct. I/We authorize investigation of all credit references listed. All related terms and conditions are defined in our invoice. I/We further understand and agree that all accounts or money due to Garden Grove Nissan shall be paid in accordance with the payment terms stated above and I/We agree to pay all reasonable costs of collection costs which are no less than 35% of the unpaid principle plus interest in addition to any court costs and/or attorney fees incurred.

Authorized Signature \_\_\_\_\_ Title (President/CEO/CFO) \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

## Personal Guarantee

The undersigned, for value received, hereby unconditionally guarantee(s) to Garden Grove, a California partnership, full payment of all sums due and owing, pursuant to the terms indicated. The undersigned further guarantee(s) all renewals, extension, additions thereof. The undersigned agrees(s) to pay \$25.00 fee for each returned check and authorize(s) that the fee and the check amount can be electronically collected. The undersigned further agree(s), in the event legal action is instituted to enforce collection, to pay reasonable attorney's fees and costs for such legal action. The undersigned also agree(s) to submit to legal jurisdiction in the county of Orange of California. Upon payment in full of any invoices, this guarantee will remain in effect and will apply to any and all purchases made thereafter.

Guarantor (President /Owner only) \_\_\_\_\_

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

Date \_\_\_\_\_

Social Security No. \_\_\_\_\_

Driver's License No. \_\_\_\_\_

Date of Birth \_\_\_\_\_



# GARDEN GROVE NISSAN

This is to confirm that \_\_\_\_\_ is applying for credit with **Garden Grove Nissan** and this serves to give **Garden Grove Nissan** the right to contact our bank and provide **Garden Grove Nissan** with the necessary information pertinent to our application.

## 1. COMPANY INFORMATION:

Company Legal Name \_\_\_\_\_

DBA of \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email: \_\_\_\_\_

Please provide the signature that appear on the bank signature card:

**Authorized Signature** : **x** \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

## 2. BANK INFORMATION

Bank Name: \_\_\_\_\_ Account No: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Officer: \_\_\_\_\_ Title: \_\_\_\_\_

## FOR BANK USE ONLY:

The above captioned company has applied for a credit with us. We appreciate your assistance in providing the following information. The information provided is for internal use only and will be kept strictly confidential. Thank you for your corporation.

	CHECKING	SAVINGS	OTHER
Open Date	_____	_____	_____
Avg. Balance	_____	_____	_____
Current Balance	_____	_____	_____
No. of NSFS	_____	_____	_____
Account Rating	_____	_____	_____
Credit Line:	yes _____ no _____	Secured: yes _____ no _____	
Credit Limit:	_____	Current balance: _____	
Comments:	_____		

General Rating: : [ ] Satisfactory [ ] Unsatisfactory

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_