



90 Walker Lane • Newtown, PA 18940
(215) 579-4200 • Fax: (215) 579-9510

NEW ACCOUNT INFORMATION

Applicant: Company Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Business Phone # _____ Year Bus. Established _____ No. of Employees _____

Contact Name _____

Corporation (State _____) Partnership Proprietorship

Tax exempt? Yes No Sales tax exemption # _____ **If exempt, Exemption Form must accompany application.**

Address to where invoices are to be sent (if different from above):

Address _____

City _____ State _____ Zip _____

Contact Name _____

Owners (if Applicant is Proprietorship or Partnership) / Officers (if Applicant is Corporation):

Name _____ Title _____

Home Address _____ Home Phone # _____

City _____ State _____ Zip _____

Name _____ Title _____

Home Address _____ Home Phone # _____

City _____ State _____ Zip _____

Name _____ Title _____

Home Address _____ Home Phone # _____

City _____ State _____ Zip _____

CREDIT REFERENCES

Applicant authorizes Bucks Digital Printing to obtain credit and financial information concerning the Applicant at any time and from any source.

Bank _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____

Account # _____

Applicant's Trade References:

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____

TERMS: Net 30 days

For the purpose of procuring and establishing credit with Bucks Digital Printing, the undersigned Applicant provides the information contained herein, which is warranted to be true and correct. In consideration of Bucks Digital Printing extending credit to Applicant, Applicant agrees to pay for all items sold to Applicant by Bucks Digital Printing in accordance with our terms of NET 30. Applicant agrees that each of the terms and conditions of sale stated on the Bucks Digital Printing invoices shall be a term of the contract of each sale to Applicant. Applicant acknowledges that a monthly service charge of the highest amount legally allowed in this State shall be made on all sums due to Bucks Digital Printing which have not been paid by the 30th day of the month following billing, and Applicant agrees to promptly pay said service charge. An additional service charge, computed on the same basis, will be due and payable every thirty (30) days thereafter. Waiver of any one or more service charges shall not be deemed to be a waiver of future service charges. Applicant further agrees that with regard to such service charges, Applicant and Bucks Digital Printing are parties to a written contract. Should it become necessary to place the account with a collection agency or attorney, the Applicant agrees to pay all collection costs and attorney fees in addition to all other sums due. The undersigned warrants that the above agreement has been carefully read and that Applicant understands the same.

Authorized Signature _____ Title _____ Date _____