



# CREDIT APPLICATION FORM

2501 N. ONTARIO STREET | BURBANK, CA. 91504  
TEL: (818) 565-3536 | FAX: (818) 565-3524 | SALES@ROMACOSTUME.COM

I/WE herein make application to Roma Costume, Inc. ("Roma") for credit and/or to update and reconfirm our existing account and balance with Roma. I/WE authorize Roma to verify and check the information stated herein on both the corporation and consumer credit (if available) on principal officers. If credit is granted, I/WE promise to pay all bills rendered.

\*\*PLEASE TYPE/PRINT CLEARLY\*\*

**ANSWER ALL QUESTIONS**

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

Business Name or D.B.A.: \_\_\_\_\_

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

Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_-\_\_\_\_

Federal ID# \_\_\_\_\_ State Resale: \_\_\_\_\_

( ) Partnership ( ) Proprietorship ( ) Incorporated ( ) Limited Liability Company What State? \_\_\_\_\_

How Long (Yrs.): \_\_\_\_\_ No. of Employee(s): \_\_\_\_\_ Annual Sales: \_\_\_\_\_

Contact Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Social Security # (Required For Net Accounts Only): \_\_\_\_\_

Requesting Terms (Please Circle One): ( **Company Check** ) ( **Net 10** ) ( **Net 30** )

### TRADE REFERENCES

COMPANY NAME: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_-\_\_\_\_

COMPANY NAME: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_-\_\_\_\_

COMPANY NAME: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_-\_\_\_\_

### **DEFAULT AGREEMENT**

I/WE understand and agree that any credit granted shall be paid promptly in accordance with terms and agreements. In the event payment is not made and this account is referred to collections, I/WE will pay Roma one and one-half percent (1 1/2%) per month to any balance owed and pay cost of collection equal to 10% of the principal amount. If suit or action by an attorney is instituted, I/WE promise to pay attorney fees in said suit or action. It is understood that all billing or accounts receivable and credit are processed through headquarters in Los Angeles County, California and is the venue for litigation allowable in State or Federal Court, otherwise venue will be at Roma's discretion. I/WE undersigned agree to guarantee payment of all sums due and owing. I/WE understand that venue is as stated above and that this continuing guarantee shall not be revoked except by written notice to Roma.

Signed by \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
**President/Owner Only**

### **INDIVIDUAL PERSONAL GUARANTEE**

I, (NAME) \_\_\_\_\_ RESIDING AT (ADDRESS) \_\_\_\_\_  
\_\_\_\_\_; FOR AND IN CONSIDERATION OF YOUR EXTENDING CREDIT AT MY REQUEST TO  
(COMPANY) \_\_\_\_\_ (HEREINAFTER REFERRED TO AS THE  
"COMPANY"), OF WHICH I AM (TITLE) \_\_\_\_\_, HEREBY PERSONALLY GUARANTEE  
TO ROMA THE PAYMENT DUE. FURTHERMORE, ANY OBLIGATION OF THE COMPANY DUE, I HEREBY AGREE TO  
BIND MYSELF PERSONALLY TO PAY ROMA ON DEMAND ANY SUM WHICH MAY BECOME DUE TO ROMA 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 DEFAULT, NON-PAYMENT AND NOTICE HEREOF  
AND CONSENT TO ANY MODIFICATION OF RENEWAL OF CREDIT AGREEMENT HEREBY GUARANTEE.

Signed by \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

www.romacostume.com