



764 Brogdon Rd Suwanee, GA 30024
 Phone : (678) 482 7331
 Fax : (678) 482 6387

Credit Application

Name of The company _____	Telephone _____	Fax _____	<input type="checkbox"/> Partnership
Street Address _____	City _____	County/State _____	Zip _____
Billing Address, If Different _____	City _____	State _____	Zip _____
E-Mail Address _____	Incorporated In State of _____		
Account Payable Contact _____	Type of Business _____	Yrs. In Bus. _____	Federal Tax No. _____
Parent Company Name & Address (If Any) _____			
City _____	County _____	State _____	Zip _____
Resale (if yes submit with tax exemption card)			
NO			YES
			BOTH

OFFICERS/PRINCIPALS OF COMPANY

Name	Home Address	Social Security No.	Title	Ownership %

PRIMARY CREDIT REFERENCES

Name	Address	Telephone	Contact

BANK INFORMATION

Bank Name: (If Less than 2 years, include prior bank)	Address: Telephone & Contact:	Account Number:
		Checking: _____
		Savings: _____
		Loans : _____

Monthly credit requirements will be approximately \$ _____



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CREDIT AGREEMENT

The applicant named hereby makes application to credit and provides the information herein, which is warranted to be true and correct for the purpose of having Cigma, Inc. make periodic sales of goods and materials. In consideration thereof, it is agreed and understood that - 1) The undersigned is an authorized agent of the applicant and is duly empowered to enter into and make binding agreements on its behalf; 2) Payments shall be made to Cigma at 764 Bragdon Road Suwanee, Georgia 30024; 3) A Purchase Money Security Interest in all goods and materials purchased shall be retained by Cigma, Inc. until payment in full has been received; 4) In the event of default of payment when due, or any other dispute between the parties, the prevailing party. in addition to any other relief which the court may grant, shall be entitled to reasonable attorney's fees and actual cost; 5) The applicant agrees to pay a LATE PAYMENT CHARGE equal to 1-1/2% per month as liquidation damages for each day that payment is delayed beyond the agreed upon terms; 6) All claims must be made WITHIN 15 days upon receipt of goods. In the event of a dispute or litigation between the parties, it is hereby agreed that jurisdiction and venue shall vest in the County of Gwinnett and that the laws of the State of Georgia shall apply.

We hereby authorize Cigma or its agent to secure a credit report and agree to the release of credit information. This Authorization shall be continuing without expiration, and a photocopy or fax copy shall be given the same as the original. In return for the extension of credit the undersigned hereby jointly and severally personally guarantee to pay and be responsible for payment of all amounts due. Seller by Applicant, including collection charges and/or attorney's fee. The undersigned hereby waives notice of default or non-payment. Seller shall be entitled to look to the undersigned for full payment without prior demand, notice of seeking recourse against any other party. It is further agreed that the laws of the State of Georgia shall apply and that in the event there is litigation commenced to enforce this guarantee. The proper jurisdiction shall be in the County of Gwinnett.

Signature _____ Title _____ Date _____

* PLEASE NOTIFY CIGMA WHETHER TO USE THE CREDIT CARD NUMBER ON FILE, OR AN ALTERNATE METHOD OF PAYMENT BEFORE YOUR ORDER IS SHIPPED OR PICKED UP.
* PLEASE NOTE: IT IS A REQUIREMENT THAT WE KEEP A VALID, UP-TO-DATE CREDIT CARD NUMBER FOR YOU ON FILE AT ALL TIMES IN CASE OF NON PAYMENT

NAME ON CARD _____

AMEX _____ DISCOVER _____ MASTERCARD _____ VISA _____ CARD #: _____ - _____ - _____ - _____

EXPIRATION DATE: _____ / _____ / _____ I.D. CODE (3 OR 4 DIGITS ON BACK OF CARD) _____

Signature _____ Date _____

Salesman _____ Territory _____ Business Type _____

Finance Manager Approval _____ Date _____ Credit Line Approval _____ Term _____

FOR OFFICE USE ONLY

Salesman _____ Territory _____ Business Type _____

Finance Manager Approval _____ Date _____ Credit Line Approval _____ Term _____



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TAX EXEMPTION CARD

Firm Name _____

I hereby certify that I hold valid seller's permit No. _____

Issued in pursuance of the Sales and Use Tax law, and I am engaged in the business of selling

And that tangible personal property described herein, which I shall purchase from Cigma, will be resold by me in the form of tangible personal property. PROVIDED, however that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay for the tax, measured by the price of such property.

Description of property purchased: _____

Signature _____ Date _____

Address _____ Phone _____

Salesman _____ Territory _____ Business Type _____

Finance Manager Approval _____ Date _____ Credit Line Approval _____ Term _____

