

# HyperLink<sup>INC</sup>

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|--------------------|
| Store Hours: _____ |
| Forecast: _____    |

## Confidential Credit Application

Legal Name \_\_\_\_\_ Corporation  Partnership  Sole Prop  Other \_\_\_\_\_  
 Other Names Used \_\_\_\_\_ If not a corporation: Name \_\_\_\_\_ SSN \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Date This Business Was Established \_\_\_\_/\_\_\_\_/\_\_\_\_ Federal Tax ID # \_\_\_\_\_  
 E-mail \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Mobile # \_\_\_\_\_

### Additional Locations:

1. Add'l Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_  
 2. Add'l Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Contact: \_\_\_\_\_  
 3. Add'l Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Contact: \_\_\_\_\_

### Principal Officers, Partners, Or Owners Information:

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone # \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_ DOB: \_\_\_\_\_  
 Name \_\_\_\_\_ Title \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone # \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_  
 Contact Person Regarding Financial Matters: \_\_\_\_\_ Phone # \_\_\_\_\_

### Trade References: (Complete Addresses Are Necessary)

1) Name \_\_\_\_\_ Phone # \_\_\_\_\_ Credit Mgr \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 2) Name \_\_\_\_\_ Phone # \_\_\_\_\_ Credit Mgr \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Bank Reference

Bank Name \_\_\_\_\_ Account # \_\_\_\_\_ Contact \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

The information in this application is furnished for the purpose of obtaining credit and is represented by the applicant to be true and complete. This application authorizes HyperLink, Inc. (HLI) to investigate all credit references and any other matter pertaining to applicant's financial responsibility. The undersigned (Dealer) authorizes its bank(s) and creditors to submit complete information for the purposes of credit evaluation.  
 The undersigned personally guarantee jointly and severally, the prompt and full payment of all amounts hereafter due HLI from the above referenced entity under this agreement and HLI may proceed directly against the undersigned without the need to proceed first against the above referenced entity. Furthermore all partners of the above referenced entity are hereby made fully responsible for all stipulations of the Dealer Agreement.

Signed  \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
 Partner \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Please attach the following documents in order to process the application: **A copy of the Driver's License for each Owner or Partner • A copy of the Certificate of Authority • A copy of a Voided Check • Pictures of the inside and outside of the location.**

35 South West Street, Mount Vernon, NY 10550  
 877-237-4040 • [www.hyperlinkusa.com](http://www.hyperlinkusa.com)