TURTLEBOX®

B2B Credit Application

11020 Katy Fwy #201, Houston, TX 77043 | 832-543-9400

APPLICANT / COMPANY INFORMATION

Legal Business Name

DBA (if applicable)

Federal Tax ID / EIN

Resale Certificate #

Business Phone

Business Email

Website

Years in Business

# of Employees

Business Type: ☐ Corporation ☐ LLC ☐ Partnership ☐ Sole Proprietor

BILLING ADDRESS

Street Address

City

State

ZIP

Country

SHIPPING ADDRESS

☐ Same as billing address

Street Address

City

State

ZIP

Country

Shipping Contact Name

Shipping Contact Phone

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PRIMARY BUSINESS CONTACT

Full Name _____ Title _____ Phone _____

Email _____

ACCOUNTS PAYABLE CONTACT

Full Name _____ Phone _____ Email _____

BANK REFERENCE

Bank and trade references below are optional at the time of application. We will reach out if the references are required after the initial credit screening.

Bank Name _____ Bank Phone _____ Years with Bank _____

Bank Contact / Officer _____ Account / Reference # _____

TRADE REFERENCES (please provide 2 suppliers you currently purchase from on credit terms)

Trade Reference 1

Company Name _____ Contact Name _____

Phone _____ Email _____ Account # _____

Years as Customer _____ Avg. Monthly Purchase Amount _____

Trade Reference 2

Company Name _____ Contact Name _____

Phone _____ Email _____ Account # _____

Years as Customer _____ Avg. Monthly Purchase Amount _____

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CREDIT REQUESTED

Credit Amount Requested ($)

Estimated Monthly Purchase Volume ($)

Terms Requested: ☐ Prepaid ☐ Net 30 (standard terms)

AUTHORIZATION & AGREEMENT

The undersigned certifies that the information provided in this application is true and accurate. The undersigned authorizes Turtlebox Audio to investigate the credit references and financial condition of the applicant business and/or its principals in connection with this application. The applicant agrees to pay all invoices per the terms extended by Turtlebox Audio, and agrees that a finance charge may be applied to past-due balances as permitted by law. This application does not guarantee approval of credit or any specific credit limit or terms.

Authorized Signature (type full name)

Print Name

Title

Date

☐ I agree to personally guarantee this account, if applicable

Guarantor Signature (type full name)

Guarantor Print Name

Guarantor Date

Please return this completed application along with a valid W-9, resale certificate (if applicable), and either the CC Authorization Form or the ACH Authorization Form to your Turtlebox Audio sales representative or to dealerinquiry@turtleboxaudio.com.