



CREDIT APPLICATION

JDS Industries, Inc.
1800 E 57th St N • Sioux Falls, SD 57104-7115
1.605.339.4010 • 1.800.843.8853 • FAX: 1.605.575.9278



Open Account - Credit Limit Desired: _____

BUSINESS: _____ **PHONE (____)** _____

BILLING ADDRESS: _____ **FAX (____)** _____

CITY: _____ **STATE/PROVINCE:** _____ **POSTAL CODE:** _____

SHIPPING ADDRESS: _____

CITY: _____ **STATE/PROVINCE:** _____ **POSTAL CODE:** _____

TYPE OF BUSINESS: _____ **E-MAIL:** _____

YEAR BUSINESS ESTABLISHED: _____ **LENGTH OF TIME IN BUSINESS (CURRENT OWNER):** _____

STATE RESALE TAX NO.: _____ **FEDERAL ID NO.:** _____

NUMBER OF EMPLOYEES: _____

OWNERSHIP: SOLE OWNERSHIP _____ PARTNERSHIP _____ CORPORATION _____ **STATE OF:** _____

PRINCIPALS:

NAME: _____ **TITLE:** _____ **PHONE (____)** _____
CELL (____) _____
ALT (____) _____

NAME: _____ **TITLE:** _____ **PHONE (____)** _____
CELL (____) _____
ALT (____) _____

NAME: _____ **TITLE:** _____ **PHONE (____)** _____
CELL (____) _____
ALT (____) _____





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BUSINESS: _____

BANK REFERENCES:

BANK: _____ **PHONE (____)** _____

ACCOUNT NO.: _____ **FAX (____)** _____

ADDRESS: _____ **CITY:** _____

STATE/PROVINCE: _____ **POSTAL CODE:** _____ **E-MAIL:** _____

TRADE REFERENCES:

1) NAME: _____ **ACCOUNT NO.:** _____

ADDRESS: _____ **FAX NO. (____)** _____

CITY: _____ **STATE/PROVINCE:** _____ **POSTAL CODE:** _____

EMAIL: _____

2) NAME: _____ **ACCOUNT NO.:** _____

ADDRESS: _____ **FAX NO. (____)** _____

CITY: _____ **STATE/PROVINCE:** _____ **POSTAL CODE:** _____

EMAIL: _____

3) NAME: _____ **ACCOUNT NO.:** _____

ADDRESS: _____ **FAX NO. (____)** _____

CITY: _____ **STATE/PROVINCE:** _____ **POSTAL CODE:** _____

EMAIL: _____

Applicant/Guarantor's signature attests financial responsibility, willingness and ability to pay our invoices in accordance with our terms. In the event of a past due balance on account, customer agrees to authorize JDS Industries, Inc. to debit a customer credit card on file for an amount up to the past due balance. The authorization will remain in effect as long as the customer has a balance. Applicant/Guarantor agrees to pay reasonable attorney fees plus interest in case of default in payments in compliance with terms. Interest charge of 1½% per month on the unpaid balance will be charged on all past due accounts. If Applicant/Guarantor fails to meet the terms and conditions of their account, the applicant agrees to allow JDS Industries, Inc. to charge the credit card used previously on the account for the remaining balance on the account. Applicant/Guarantor further agrees to notify JDS Industries, Inc. in writing of any change in ownership and that all charges incurred will remain their responsibility unless agreed to by JDS Industries, Inc. in writing.

Applicant/Guarantor agrees that all sales shall be deemed to have been made, and jurisdiction and venue for any legal action instituted for collection thereupon, shall be vested in the County of Minnehaha, State of South Dakota, in the appropriate Courts thereof. Applicant/Guarantor waives personal service, and consents that service of process shall be made by Certified Mail Return Receipt Requested, to the above billing address. The undersigned agree(s) to pay JDS Industries, Inc all collection costs and attorney fees incurred to collect the obligations of said business to JDS Industries, Inc or enforce any rights of JDS Industries, Inc under this guarantee, and further waive trial by jury.

Personal Guarantee: The below signor agrees to pay JDS Industries, Inc., and personally guarantees faithful payment when due. The undersigned expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notices of default by the company seeking credit and all other notices the guarantor might be entitled to. The undersigned will reimburse JDS Industries, Inc. for all expenses and attorney fees plus interest in case of default in payments in compliance with terms. Interest charge of 1½% per month on the unpaid balance will be charged on all past due accounts. Revocation of the guarantee shall be in writing and delivered by certified mail. Please allow 4 weeks for credit approval.

Signed: _____ **Title:** _____ **Date:** _____