

**RVB Systems Group - Credit Application**  
**(919) 362-5211 voice – (919) 342-5649 fax**

<b>COMPANY INFORMATION</b>		
<b>COMPANY LEGAL NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>BILLING ADDRESS</b>		
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PHONE</b>	<b>FAX</b>	
<b>WEB ADDRESS</b>	<b>FEDERAL TAX ID</b>	
<b>DUNS NUMBER</b>	<b>CIRCLE ONE</b> <b>INDIVIDUAL      PARTNERSHIP      CORPORATION</b>	
<b>CONTACT NAME</b>	<b>EMAIL</b>	
<b>AMOUNT OF CREDIT REQUESTED</b>	<b># OF EMPLOYEES</b>	<b>DATE ESTABLISHED</b>

<b>TRADE REFERENCES (3 REQUIRED)</b>		
<b>COMPANY NAME</b>	<b>CONTACT NAME</b>	
<b>ADDRESS</b>	<b>EMAIL</b>	
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PHONE</b>	<b>FAX</b>	

<b>COMPANY NAME</b>	<b>CONTACT NAME</b>	
<b>ADDRESS</b>	<b>EMAIL</b>	
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PHONE</b>	<b>FAX</b>	

<b>COMPANY NAME</b>	<b>CONTACT NAME</b>	
<b>ADDRESS</b>	<b>EMAIL</b>	
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PHONE</b>	<b>FAX</b>	

<b>BANK REFERENCE (REQUIRED)</b>		
<b>BANK NAME</b>	<b>CONTACT NAME</b>	
<b>ADDRESS</b>	<b>EMAIL</b>	
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PHONE</b>	<b>FAX</b>	<b>ACCOUNT #</b>

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I declare that the above information is true, correct and complete and is given to induce RVB SYSTEMS GROUP to extend credit. I authorize RVB SYSTEM GROUP to make such credit investigation, including contacting the above trade references and banks and obtaining credit reports. I authorize all trade references, banks and credit reporting agencies to disclose to RVB SYSTEMS GROUP any and all information concerning the financial and credit history of my company and myself:

I have read the terms and conditions stated below and agree to all of those terms and conditions

Name of  
Company

\_\_\_\_\_

Authorized  
Signature :

\_\_\_\_\_

Printed Name :

\_\_\_\_\_

Title :

\_\_\_\_\_

Date :

\_\_\_\_\_

**GENERAL TERMS AND CONDITIONS**

1. All bills become payable in full 30 days after receipt. If not paid by such time, bills are considered past due.
2. A service charge of 5% per monthly will be added to all amounts billed if not paid by the end of the month, together with interest at the rate of 1½% per month.

When complete, return signed original to:

**RVB Systems Group**  
**Attn: New Accounts**  
**6952 Wade Dr.**  
**Cary NC 27519**  
**(919) 342-5649 (fax)**