

CREDIT APPLICATION

TrafficGuard® Direct, Inc.
 P.O. BOX 201
 GENEVA, IL 60134

 NAME OF APPLICANT

 BUSINESS PHONE

 STREET ADDRESS

 BUSINESS FAX

 CITY, STATE, ZIP

 CONTACT NAME

 SHIPPING ADDRESS

 TYPE OF BUSINESS

 CITY, STATE, ZIP

- INDIVIDUAL
- PARTNERSHIP
- CORPORATION

 DATE ESTABLISHED

 DUN & BRADSTREET #

 SALES TAX NUMBER

OWNER/PRESIDENT	VP/PARTNER	SEC./TREASURER
NAME	NAME	NAME
ADDRESS	ADDRESS	ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP	CITY, STATE, ZIP

TRADE REFERENCES		
NAME	NAME	NAME
ADDRESS	ADDRESS	ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP	CITY, STATE, ZIP
PHONE NUMBER	PHONE NUMBER	PHONE NUMBER

*PLEASE COMPLETE AND SIGN PAGE 2 OF THIS APPLICATION
 AND RETURN VIA FAX—800.814.7194*

BANK REFERENCE

NAME AND ADDRESS OF BANK	PHONE NUMBER FAX NUMBER
CITY, STATE	ACCOUNT NUMBER
CHECKING ___ SAVINGS ___ LOANS ___	CONTACT NAME

30 DAY TERMS AGREEMENT AND RELEASE OF CREDIT INFORMATION

I AGREE TO PAY ALL CHARGES IN FULL NET 30 DAYS FROM THE INVOICE DATE. I AGREE AND UNDERSTAND THAT TRAFFICGUARD® DIRECT MAY AT ANY TIME AND FOR ANY REASON WHATSOEVER REFUSE TO EXTEND TO ME ANY FURTHER CREDIT IN REGARD TO THIS ACCOUNT OR ANY OTHER ACCOUNT THAT I MAY HAVE WITH TRAFFICGUARD® DIRECT. I FURTHER AGREE AND UNDERSTAND THAT BY SIGNING THIS APPLICATION, I AM AGREEING TO BE HELD PERSONALLY LIABLE TO PAY ANY AND ALL CHARGES IN CONNECTION WITH MY ACCOUNT INCLUDING BUT NOT LIMITED TO THE BALANCE OF THE ACCOUNT, ANY LATE CHARGES, COLLECTION FEES, AND INTEREST AT THE HIGHEST ALLOWABLE RATE ON ANY DELINQUENT AMOUNT. IF THIS ACCOUNT IS PLACED IN THE HANDS OF ANY ATTORNEY FOR COLLECTION, THE UNDERSIGNED PROMISES AND AGREES TO PAY REASONABLE ATTORNEYS FEES AND/OR COURT COSTS.

SIGNATURE BELOW ALSO AUTHORIZES THE RELEASE OF CREDIT INFORMATION TO TRAFFICGUARD® DIRECT FROM MY BANK, TRADE REFERENCES, OR OTHER SOURCE, BOTH NOW AND AT ANY FUTURE DATE WITH THIS FORM. I AUTHORIZE THE BANK AND OTHER SOURCES TO ACCEPT A FAX COPY IN LIEU OF AN ORIGINAL. THE CREDIT INFORMATION OBTAINED FROM MY REFERENCES WILL BE USED FOR THE PURPOSE OF SETTING UP OR REVIEWING MY CREDIT ACCOUNT WITH TRAFFICGUARD® DIRECT AND IS UNDERSTOOD TO BE SOLELY OUT OF COURTESY.

AUTHORIZED SIGNATURE

DATE

PRINTED NAME

Fax 800.814.7194