



CREDIT APPLICATION

Complete application and fax to 800.441.2015, or
mail to ABBA Optical, Inc. P.O. Box 870030,
Stone Mountain, GA 30087

1. Business Name _____
2. Address _____
3. City, State, Zip _____
4. Telephone Number _____
5. D/B/A _____
6. Federal Tax ID Number _____
7. Type of Business _____
8. Date Established _____
9. How Long in Business _____
10. Does State, County or City require a license? Yes No (If yes, License # _____)
11. Ownership: Sole Owner Partnership Corporation
12. Principal. Name: _____
Title: _____
SS #: _____
Home Address: _____
13. Principal. Name: _____
Title: _____
SS #: _____
Home Address: _____
14. Trade References (name of suppliers of major products and services).
Name, Account Number City, State, Phone Number
a. _____
b. _____
c. _____
15. Bank Reference: Checking Loan Savings
Name, Account Number City, State, Contact Person
a. _____
b. _____
c. _____

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16. Number of Employees: _____

17. Estimated Annual Sales: _____

18. Sales Area: _____

19. Has the company or any of its Principals ever been bankrupt? Yes No
 If yes, please explain: _____

20. Mortgage Holder/Landlord: _____
 Address: _____
 Phone Number: _____

21. Other Business Debts:

Name	Complete Address	Balance Due
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____

22. Applicant agrees to pay any collection costs incurred to collect the amount balance, including reasonable attorney's fees. The undersigned will/will not submit a financial statement. The undersigned as an inducement to grant credit warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed above.

(Name)	(Title)	(Name)	(Title)
(Name)	(Title)	(Name)	(Title)

23. Personal Guarantee.

In consideration of credit being extended by ABBA Optical, Inc. to the above named applicant for merchandise to be purchased whether applicant be an individual or individuals, a proprietorship, a partnership, a corporation, or other entity, the undersigned guarantor or guarantors each hereby contract and guarantee to ABBA Optical, Inc. the faithful payment, when due, of all accounts of said applicant for purchases made within five years next after the date of this application. The undersigned guarantor or guarantors each hereby expressly waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment, and demand for payment on applicant, protest and notice to undersigned guarantor or guarantors of dishonor or default by applicant or with respect to any security held by ABBA Optical, Inc. extension of time of payment to applicant, acceptance or partial payment or partial compromise, all other notices to which the undersigned guarantor or guarantors might otherwise be entitled and demand for payment under this guarantee. Any revocation of this guarantee shall be in writing and delivered to: ABBA Optical, Inc. 2230 Centre Park Court, Stone Mountain, GA 30087.

 (Name) (Social Security #)