



CUSTOMER ACCOUNT APPLICATION/UPDATE FORM

Sales Contact: _____
Ext: _____

I/WE herein make application to MAX GROUP CORPORATION for credit and/or to update and reconfirm our existing account and balance with MAX GROUP CORPORATION. Applicant(s) authorized their permission to MAX GROUP CORPORATION to verify and check the information stated herein on both the corporation and consumer credit (if available) on principal officers. If credit is granted, I/WE promise to pay all bills rendered.

Legal Company Name: _____ Business of D.B.A. _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Type of Business: _____
Federal ID: _____ State Resale#: _____

Partnership Proprietorship Corporation
How Long (yrs) _____ No. of Employees: _____
President / Owner Name: _____ Ext. _____ Email: _____
Accounts Payable Contact: _____ Ext. _____ Email: _____
Purchasing Contact: _____ Ext. _____ Email: _____
Company Bank: _____ Checking Acct: _____ Savings Acct: _____
Credit Line (if available) _____ (For additional bank info, please use separate sheet.)
Bank Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Contact: _____ Position: _____

CREDIT REFERENCES

1. Company Name: _____ Contact: _____ Phone: _____
2. Company Name: _____ Contact: _____ Phone: _____
3. Company Name: _____ Contact: _____ Phone: _____

PRINCIPAL OF COMPANY

1. Name: _____ SSN: _____ Home Address: _____
City: _____ State: _____ Zip: _____ Own Rent Title: _____
2. Name: _____ SSN: _____ Home Address: _____
City: _____ State: _____ Zip: _____ Own Rent Title: _____
Authorized People to Purchase (1) _____ (2) _____

DEFAULT AGREEMENT

Max Group Corporation or its affiliates may impose a monthly finance charge on any delinquent payments at a rate equal to 1% of the unpaid balance of the invoice price per month, commencing thirty (30) days after the due date. Max Group Corporation shall also be entitled to recover its cost of collection, including reasonable attorneys' fees for any delinquent amount. Applicant agrees that personal jurisdiction and venue for any litigation involving this account, at Max Group Corporation's sole discretion, shall be in the Superior Court located in Los Angeles County California and Applicant further agrees to waive the right to jury trial in any such litigation.

Signed by X _____ Print Name: _____ SSN: _____ Date: _____
President/Owner Only

In consideration of your extending credit to Applicant, (I) (WE) jointly and severally guarantee payment to you of all indebtedness, which Applicant has incurred or may incur, and performance of all obligations of said Applicant. The liability of the undersigned shall not be affected by the amount of credit extended to Applicant, or by any change in the amount or form of said credit or of said indebtedness, or by any extension or renewal thereof. This guaranty shall continue in full force and effect until such time as you shall receive from the undersigned written notice of revocation, and such revocation shall not in any way relieve the undersigned from liability for any indebtedness or obligation incurred prior to the actual receipt by you of said notice.

Signed by X _____ Print Name: _____ SSN: _____ Date: _____
Guarantor

Signed by X _____ Print Name: _____ SSN: _____ Date: _____
Guarantor