

# Credit Application



**iStock member name:** \_\_\_\_\_ **Limit Requested:** \_\_\_\_\_

**Business Name:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Accts. Payable Contact:** \_\_\_\_\_ **Direct Phone #:** \_\_\_\_\_

**Accts. Payable Email:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Invoices should be sent to:**      **Business Contact**      **Accts. Payable Contact**

**Invoices should be sent by:**      **Email**      **Mail**      **Fax**      **Is a PO required?** \_\_\_\_\_

**Business Profile:**      **Corporation**      **Partnership**      **Sole Proprietorship**

**Date Established:** \_\_\_\_\_ **No. of Employees:** \_\_\_\_\_ **D&B #:** \_\_\_\_\_

**Industry:** \_\_\_\_\_ **Website Address:** \_\_\_\_\_

**Has the applicant or any of its owners ever filed a petition of bankruptcy?**      **Yes**      **No**

**No. of Locations:** \_\_\_\_\_ **Sales last year:** \_\_\_\_\_ **Estimate this year:** \_\_\_\_\_

**We Authorize iStockphoto LP and its affiliates to contact the accounts below for credit information:**

Bank Name	Officer Name	Phone #	Fax #
Account #	Line of Credit balance	Loan type	Balance

**Trade References ( please list highest dollar volume reference )**

Company Name	Contact Person	Fax number (Required)	Telephone number
1.			
2.			
3.			

**Terms and Conditions:**

Terms of payment are net 30 days. Overdue accounts will automatically be placed on credit hold and may be suspended. Use Licenses will be revoked if not paid in full. All accounts not paid in 90 days will be remanded to a collection agency or attorney for further action and you will be responsible for paying any collection costs and legal fees.

I certify that all information on this form is correct and that I authorize iStockphoto LP to check any and all credit as deemed necessary.

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return this application to Client Relations: Fax 403-398-6815**

**For Office use only**

Approved by	Date Approved	Authorization	Credit Limits
Review	Info	BR	TR1    TR2    TR3
<b>Comments:</b>			