



Shop 31 Pavilion Mall, 13 Constant Spring Road, Kingston, Jamaica

ACCOUNT APPLICATION

Company Name:		Tel #:	Fax #:
Billing Address:		City:	State:
Website:	This Company is a: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> LLC	Name of <input type="checkbox"/> Parent Company or <input type="checkbox"/> Subsidiary (if any):	Tax ID #:
Established Date:	Type of Business:	Latest Annual Sales:	Bus. Registration #:
No. of employees:	Owner's Name:		
Product Line Intend to Purchase:	Requested Credit Line:	Term Requested (Indicate Preference): <input type="checkbox"/> Prepaid; <input type="checkbox"/> COD Cashier Check; <input type="checkbox"/> COD Company Check; <input type="checkbox"/> Net Term _____ Days	

Please attach a copy of your TCC, Business Registration and Photo ID.

Bank References

1. Bank Name:		Address:	
Contact Person:	Title:	Tel #:	Fax #:
Checking A/C # :	Date Open:	Saving A/C # :	Date Open:

Trade References Please list only major trade.

1. Company Name:		Address:	
Contact Person;	Title:	Tel #:	Fax #:
Account # :	Date Opened:	Credit Limit:	Term:
2. Company Name:		Address:	
Contact Person:	Title:	Tel #:	Fax # :
Account # :	Date Opened:	Credit Limit:	Term:
3. Company Name:		Address:	
Contact Person:	Title:	Tel #:	Fax #:
Account # :	Date Opened:	Credit Limit:	Term:

This account application needs to be submitted in order to open an account with Royale Computers & Accessories Ltd. Customer certifies that the above information is true and correct and authorizes investigation of all credit references listed.

Authorized Officer's Signature	Name & Title (Print)	Date
--------------------------------	----------------------	------

Important Note: If net term requested, please supply the most recent annual financial statement, including balance sheet, income statement, cash flow statement, and accompanying notes.

PERSONAL GUARANTEE

The undersigned, having a financial interest in this account application and also understands that Royale Computers & Accessories Ltd. would not agree to accept this account application if the undersigned did not execute and deliver to Royale Computers & Accessories Ltd. this personal guarantee, for value received, hereby unconditionally guarantee(s) to Royale Computers & Accessories Ltd., full payment of all sums due and owing, pursuant to the terms indicated. The undersigned further guarantee(s) all renewals, extension, additions thereof. The undersigned also agree(s) to submit to exclusive legal jurisdiction exercised by the state and/or federal courts having jurisdiction in Jamaica. Royale Computers & Accessories Ltd. shall have the right to proceed against Guarantor following any breach or default by the Applicant without first instituting proceedings against the Applicant and without previous notice to or demand upon either the Applicant or Guarantor. Upon payment in full of any invoices, this guarantee will remain in effect and will apply to any purchases made thereafter.

Guarantor
(President/Owner only) Signature Name & Title (Print) Date

Driver's License # and State

BANK REFERENCE REQUEST

Bank Name:	Bank Address:
Bank Tel # :	Bank Fax #:
Company Name:	Company Address:
Company Tel #:	Company Fax #:

The company named hereby authorized the release of credit and bank information. Please fill out the following information and fax this form back to us as soon as possible. We appreciate your cooperation. We will maintain the information confidential.

Account #: [] Checking; [] Saving		Account Open Date:
Current Balance:	Average Balance (last 12 months):	For The Last 24 Months, Number of Stop-Payments _____ Number of NSF
Comments Of This Account: (confidentially controlled):		
Information Provided By (Bank Officer):	Title:	
Signature:	Date:	

Financial Authorization – To Release Confidential Information

To: Financial Institution			
Please accept this as authorization to release the requested information to Royale Computers & Accessories Ltd.			
From: _____			
Company Name	Authorized Signature	Name & Title (Print)	Date

Thank you very much for your prompt attention to this request. Please fax back to **(876)754-2711 Attn: Credit Dept.** or call us at (876)754-5048 if you have any questions or concerns.