**NEW ACCOUNT/CREDIT APPLICATION** 

D&B #:	Corporation (Please indicate state:	
Company:	Federal I.D.#	
Address:		
City/State/Zip:		
Phone: Fax:	Website:	
Description of Business:	Date Established:	
OWNER, PARTNERS OR OFFICERS OF C	ORPORATION:	
	TITLE Phone/Email	
TRADE REFERENCES: (Please supply three		
	ADDRESS CONTACT NAME/PHONE	
1		
2		
3		
<b>BANK REFERENCE:</b> We authorized our bank listed below to release credit information regarding the following account(s) to Tech Rep Inc	AUTHORIZATION & AGREEMENT         In support of this application, Tech Rep Inc. is         hereby authorized to obtain credit and /or financial         information from our bank(s) and other commercial         or financial firms which I/we have done business. It         is understood that any such credit and/or financial	
BANK NAME	information will be held in strict confidence and use only for consideration of this application. Upon approval of this application, it is agreed that a	
ADDRESS	purchases will be paid in accordance with the terms of the sale from the date of the invoice. Should I/we not pay Tech Rep Inc. according to the terms, it	
CITY/STATE/ZIP CODE	is understood that credit privileges may be withdraw Should Tech Rep Inc. find it necessary to obtain assistance in collecting any past due balance, I/we	
CHECKING ACCT.# BANK OFFICER	agree to pay all reasonable attorney fees, collection agency fees, and/or court cost.	
()() PHONE FAX		
Authorized Signature of Applicant:	Date:	
FOR OFFICE USE ONLY		
Credit Limit:		

21 Park St. • Suite 218 • MS16 • Attleboro • MA • 02703 • (P) 774-331-2520 • (F) 774-331-2519

## **NON-DISCLOSURE AGREEMENT**

PLEASE READ AND COMPLETE THE FOLLOWING NON-DISCLOSURE AND CONFIDENTIALITY AGREEMENT.

I, the undersigned potential Technology Representatives Inc., Reseller, in consideration for Technology Representatives Inc. providing me with information on the Technology Representatives Inc. Reseller program and pricing (hereafter referred to as program/pricing), understand and agree:

- That information provided on the Reseller program/pricing is sensitive and confidential.
- That I will not disclose any information regarding the program/pricing to any other person who has not also signed and dated this agreement, except to secure their advise and counsel, in which case I agree to obtain their consent to maintain such confidentiality. The term "information" does not include any information that is, or becomes generally available to the public or is already in your possession.
- All information provided to review the program will be returned to Technology Representatives Inc. upon request without retaining copies, summaries, analyses or extracts thereof in the event the review is terminated.
- That I will not contact Technology Representatives Inc. vendors, suppliers or customers except with written permission of Technology Representatives Inc.
- That, prior to finalizing an agreement to become an authorized Reseller, it is my responsibility to make an independent verification of all information.
- That, should I enter into an agreement to become a Technology Representatives Inc. Reseller, I grant
  permission to Technology Representatives Inc. the right to obtain, through standard reporting agencies,
  financial and credit information concerning myself or the companies or other parties I represent and understand
  that this information will be held confidential by Technology Representatives Inc. and will only be used for the
  purposes of Technology Representatives Inc. extending credit to me.

## AGREED TO AND ACCEPTED:

Signature:	Date:	
Print Name:		
Company Name:		

## CREDIT CARD AUTHORIZATION

I AUTHORIZE THE USE OF MY CREDIT CARD TO SECURE PAYMENT FOR THE FIRST (2) ORDERS AT TECHNOLOGY REPRESENTATIVES INC. I ALSO UNDERSTAND THAT FAILURE TO SETTLE MY ACCOUNT ON TERMS OF NET 30 WILL ALSO BE CHARGES TO MY CREDIT CARD.

Company Name:	
Cardholder Name:	Bank Phone:
Billing Address:	
Card Holder Phone#:	
Credit Card #:	
Card Type:	Expiration Date:
Security Code (CVS):	
Signature	

(NOTE: An image of the front and back of the Credit Card and an image of the front and back of the Cardholders Drivers License must accompany this form)