



Thank you for your application to establish an account with Altair Electronics.

Our Credit Policy:

1. A line of credit will be given to accounts upon satisfactory review of credit references and a signed application acknowledging our selling terms. Standard terms are .5% 10 Net 30 Days
2. Accounts will be considered past terms when specific invoices are not paid within the stated selling terms.
3. Accounts with past due invoices must receive credit approval before additional charges may be made using the available credit line.
4. Accounts with invoices that routinely age more than 30 days beyond the due date are at risk for delayed shipments and will be considered for possible "COD Terms" only.

Completed applications may be submitted to:

Jessica Gilby
Phone: 972.699.3262
Fax: 972.699.3295
Email: JGilby@trident-metals.com (preferred method for submission)

Altair Electronics
ATTN: Jessica Gilby – Credit Department
PO Box 853900
Richardson, TX 75085

ATTENTION: It is important that we receive all of the requested information in order to efficiently review your application for terms.

A few items to note:

1. **Completed application must be signed by an Officer, Director, or Controller of the Company. (Required for approval)**
2. **Export and Buyer(s) Name(s) section must be completed. (Please include the names of all Purchasing employees that will be authorized to submit PO's to Altair.)**
3. **Specify the dollar amount of the credit line you are requesting.**
4. **A copy of your Resale Tax License or Tax Exemption Certificate must be provided, if applicable. If a form is not provided, the account will be marked taxable.**

Please contact Jessica Gilby, using the contact information above, should you have any questions or concerns in regards to your application.



Terms: One half percent (.5%) discount if paid in 10 days, Net balance due 30 days from Invoice date. Any amount not received within 30 days from Invoice date may be subject to a daily interest charge of .0493% (Annual Percent Rate 18.00%). If suit is commenced to collect any past due amounts, prevailing party shall be entitled to reasonable attorney fees and costs. All sales shall be subject to Altair Electronics Terms and Conditions. Terms and Conditions are available by visiting www.altair-co.com

*Required for Processing

Company Name*		President*
Street/Ship* To Address	(Area Code) – Telephone*	Vice President
City/State/Zip*	Fax	Controller
Billing Address*		Authorized Buyer(s)* (Full Name)
City/State/Zip*		Authorized Buyer(s) (Full Name)
Dollar Amount of Credit Line Requested*	Tax ID Number*	Accounts Payable Contact*
Nature of Business (In Detail)		Accounts Payable Telephone Number*
Will you be exporting our Raw material outside of the US?* <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, to which countries?		Accounts Payable Email Address*
Are you a <input type="checkbox"/> Subsidiary <input type="checkbox"/> Division Parent Name		Accounts Payable Fax Number
Dun & Bradstreet number (DUNS)		How many years in business?*
Bank Reference*		
Bank Name		Checking Account #
Address		Loan Account #
City/State/Zip	(Area Code) - Telephone	Account Officer
Trade Reference		
Name*	Contact	Email
Address*	(Area Code) – Telephone*	
City/State/Zip*	Fax	
Name*	Contact	Email
Address*	(Area Code) – Telephone*	
City/State/Zip*	Fax	
Name*	Contact	Email
Address*	(Area Code) – Telephone*	
City/State/Zip*	Fax	
Name	Contact	Email
Address	(Area Code) - Telephone	
City/State/Zip	Fax	
Office Use Only		
Comments		Credit Limit
		Terms
Credit Manager Signature		Salesman

Approved COD Remit payments to: P.O. Box 846196, Dallas, Texas 75284-6196

NOTICE--BY SIGNING THIS APPLICATION THE COMPANY AGREES TO THE FOLLOWING:

The Company understands and agrees that the above information is being providing for the purpose of obtaining credit. The Company represents and warrants that all information is true and correct and agrees to promptly inform Altair Electronics in writing of any changes in the information, including a change of the Company's principal place of business or billing address.

The Company hereby consents to and authorizes Altair Electronics to obtain information and investigate all information provided including contacting the references listed. The Company releases Altair Electronics, and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

Name _____

Signature* _____

Position* _____

Must be signed by Owner,
Officer, Controller or Company Principal

Date _____