

WINNER AVIATION CORPORATION

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Contacts: accounting@winner-aviation.com

CREDIT APPLICATION

Company _____

Address _____

Contact _____ Phone _____ Fax _____

Please check one: Individual Partnership Corporation

Credit Amount Requested: \$ _____

Principal's Name _____ Phone _____

State Incorporated _____ Date Incorporated _____

D & B Number _____ Federal ID # _____

Bank Name _____

Address _____

Contact _____ Phone _____

Type of Account _____ Account # _____

Business References:

Company _____ Company _____

Address _____ Address _____

Contact _____

Phone # _____

Fax # _____

Contact _____

Phone # _____

Fax # _____

Company _____

Address _____

Company _____

Address _____

Contact _____

Phone # _____

Fax # _____

Contact _____

Phone # _____

Fax # _____

Tax Exempt? _____ If so, please supply exemption certificate.

TERMS: Our terms are net 30 days, 1% discount if paid within 10 days of invoice date. A late charge of 1 1/2% will be added to all balances forty five (45) days past the date of invoice, and charged 1.5% every 30 days after the forty fifth day until paid. If a credit card is used to pay invoices that are past our 30 day terms, a 3% Convenience fee will be assessed on the balance that is being charged to the credit card.

All returned goods are subject to a 25% restocking fee (minimum \$25.00) and must be accompanied by a Return Material Authorization number (RMA) to receive credit.

In signing, as Owner, Partner, or Authorized Agent, certify all statements made on this credit application to be true and complete to the best of my knowledge, and agree to abide to the terms as stated herein.

Signature _____ Print Name & Title _____ Date _____