



**Portable Technology Solutions, LLC**  
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## Credit Application

Company Information			
Full Legal Name/ Business Entity		Ph:	Fx:
Doing Business (DBA)			
Billing Address	City	State	Zip
Company Type: Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Franchise <input type="checkbox"/> Corporation <input type="checkbox"/> Other:			
No. of Employees:	Year Established:	Annual Sales:	
Federal Tax ID:		Accts. Payable Contact:	
State of Incorporation:		Accts. Payable Phone #	
Website Address:		Accts. Payable Fax #	
Bank Reference			
Bank:	Account #:	Contact	
Address		City:	
State:	Zip:	Ph:	Fx:
Trade References			
Company Name:		Contact:	
Address:		City:	
State:	Zip:	Ph:	Fx:
Company Name:		Contact:	
Address:		City:	
State:	Zip:	Ph:	Fx:
Company Name:		Contact:	
Address:		City:	
State:	Zip:	Ph:	Fx:
We hereby apply for credit and affirm financial responsibility, ability and willingness to pay invoices in accordance with published terms. The above information is warranted to be true and complete. We hereby authorize you to verify and collect information on us, including but not limited to bank references, trade credit references, consumer and/or commercial credit reports. We agree to pay a monthly finance charge of the maximum applicable state rate on all past due balances. We agree to pay all costs of collection and litigation on this account in accordance with the laws of the Creditor's State of Incorporation. We agree that all decisions with respect to the extension or continuation of credit shall be in the sole discretion of the Creditor.			
Authorized Signature/Title:			Date: