

Princeton Technology, Inc.

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CONFIDENTIAL CREDIT APPLICATION

GENERAL INFORMATION

CUSTOMER NAME: _____

DBA: _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY: _____

STATE: _____ ZIP CODE: _____

TELEPHONE: _____

FACSIMILE: _____

WEB SITE: _____

CONTACT PERSON: _____

TYPE OF BUSINESS: INDIVIDUAL PARTNERSHIP CORPORATION

GOVERNMENT NON-PROFIT LLC

OTHER

YEARS AT PRESENT ADDRESS: _____ ANNUAL SALES: _____

FEDERAL TAX ID NUMBER: _____ NUMBER OF EMPLOYEES: _____

DATE BUSINESS ESTABLISHED: _____ NAME OF A/P CONTACT: _____

DATE INCORPORATED: _____ STATE OF INCORPORATION: _____

DUN & BRADSTREET
NUMBER: _____

ACCOUNT
NAME AND PHONE: _____

ARE PURCHASE
ORDERS REQUIRED: _____

AUTHORIZED BUYERS AND PURCHASERS:

NAME _____

NAME _____

NAME _____

NAME _____

SHIPPING INFORMATION
(IF DIFFERENT FROM ADDRESS SHOWN ON PAGE 1)

SHIPPING ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP CODE _____

BILLING INFORMATION
(IF DIFFERENT FROM ADDRESS SHOWN ON PAGE 1)

BUILDING ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP CODE _____

ATTN _____

LIST OF OFFICERS OR PARTNERS

IF A CORPORATION OR LIMITED LIABILITY COMPANY (LLC), PLEASE COMPLETE THIS SECTION:

TITLE	NAME	EMAIL OR TELEPHONE NUMBER
PRESIDENT	_____	_____
VICE PRESIDENT	_____	_____
TREASURER	_____	_____
SECRETARY	_____	_____
CONTROLLER	_____	_____
BUYER	_____	_____

IF A PARTNERSHIP, PLEASE COMPLETE THIS SECTION:

TITLE	NAME	EMAIL OR TELEPHONE NUMBER
GENERAL PARTNER	_____	_____
GENERAL PARTNER	_____	_____
GENERAL PARTNER	_____	_____
GENERAL PARTNER	_____	_____
BUYER	_____	_____

**FINANCIAL STATEMENTS
(CORPORATIONS, LIMITED LIABILITY COMPANIES AND PARTNERSHIPS ONLY)**

PLEASE ATTACH YOUR MOST RECENT TWO (2) YEARS OF AUDITED, REVIEWED OR INTERNALLY GENERATED FINANCIAL STATEMENTS. IF THE FINANCIAL STATEMENTS ARE NOT AUDITED BY A CERTIFIED PUBLIC ACCOUNTANT, A CORPORATE OFFICER OR GENERAL PARTNER MUST SIGN AND CERTIFY THE ACCURACY OF THE STATEMENTS.

TRADE REFERENCES

WE REQUIRE AT LEAST FOUR CURRENT TRADE REFERENCES:

COMPANY AND ADDRESS	TELEPHONE	A/C NUMBER	CREDIT LINE

BANKING REFERENCES

WE REQUIRE AT LEAST ONE, AND PREFERABLY TWO, CURRENT BANKING REFERENCES:

BANK NAME AND BRANCH ADDRESS	CONTACT NAME AND PHONE NUMBER	A/C NUMBER	TYPE OF A/C

CREDIT AGREEMENT

THE UNDERSIGNED AFFIRMS THAT THE ABOVE CREDIT INFORMATION IS TRUE AND CORRECT AND IS GIVEN FOR THE EXTENSION OF CREDIT BY PRINCETON TECHNOLOGY, INC. I/WE AGREE TO PAY A LATE CHARGE ON ANY UNPAID ACCOUNT AFTER 15 DAYS AT THE RATE OF 1.50% PER MONTH OR THE HIGHEST RATE ALLOWED BY LAW. SHOULD ANY DISPUTE ARISE FROM THIS AGREEMENT, THE UNDERSIGNED AGREES THAT THE PREVAILING PARTY WILL RECEIVE ITS COSTS, EXPENSES AND ATTORNEYS' FEE.

THE UNDERSIGNED SUBMITS TO THE JURISDICTION WITHIN CALIFORNIA AND VENUE FOR ANY LEGAL ACTION, WHETHER FILED BY THE UNDERSIGN OR PRINCETON TECHNOLOGY, INC. THIS AGREEMENT IS NOT TRANSFERABLE OR ASSIGNABLE WITHOUT THE PRIOR WRITTEN CONSENT OF THE PRESIDENT OF PRINCETON TECHNOLOGY, INC. I/WE HEREBY AUTHORIZE THE RELEASE OF INFORMATION TO OBTAIN CREDIT WITH PRINCETON TECHNOLOGY, INC. INCLUDING FROM ANY TRADE OR BANKING REFERENCE NAMED IN THIS APPLICATION. THE UNDERSIGNED GRANTS PRINCETON TECHNOLOGY, INC. THE RIGHT TO VERIFY ALL STATED INFORMATION IN THIS APPLICATION AND ANY ATTACHMENTS OR EXHIBITS HERETO.

IF THIS APPLICATION IS APPROVED AND CREDIT TERMS ARE EXTENDED, I/WE AGREE THAT TERMS SHALL BE NET 15 UNLESS OTHERWISE SPECIFIED IN WRITING BY PRINCETON TECHNOLOGY, INC. ALL INVOICES SHALL BE DUE AND FULLY PAYABLE WITHIN 15 DAYS FROM THE DATE OF EACH INVOICE.

GUARANTEE: IN CONSIDERATION OF CREDIT GRANTED BY PRINCETON TECHNOLOGY, INC., THE UNDERSIGNED PERSONALLY GUARANTEES ANY AND ALL CHARGES AND/OR MONEY DUE PRINCETON TECHNOLOGY, INC. BY THE CUSTOMER NAMED IN THIS APPLICATION. THIS SUM SHALL INCLUDE ANY AND ALL ATTORNEY'S FEES, COSTS, AND LATE CHARGES. IN THE EVENT PAYMENT IS DEMANDED BY PRINCETON TECHNOLOGY, INC. THE UNDERSIGNED AGREES TO MAKE PAYMENT WITHIN 15 DAYS. THE UNDERSIGNED SUBMITS TO THE JURISDICTION OF CALIFORNIA AND VENUE FOR ANY LEGAL ACTION, WHETHER FILED BY THE UNDERSIGNED OR PRINCETON TECHNOLOGY, INC. SIGNATURES TO THIS INDIVIDUAL PERSONAL GUARANTEE MAY BE COMMUNICATED AND DELIVERED BY FACSIMILE TRANSMISSION AND SHALL BE DEEMED ENFORCEABLE TO THE SAME EXTENT AS AN ORIGINAL SIGNATURE. BY EXECUTING THIS INDIVIDUAL PERSONAL GUARANTEE, THE UNDERSIGNED AGREES TO BE BOUND BY ITS TERMS. THE UNDERSIGNED GRANTS PRINCETON TECHNOLOGY, INC. PERMISSION TO OBTAIN A CONSUMER CREDIT REPORT IN CONNECTION WITH THIS INDIVIDUAL PERSONAL GUARANTEE AND TO VERIFY THE INFORMATION CONTAINED THEREIN.

CUSTOMER NAME: _____

SIGNATURES OF GUARANTORS:

SIGNATURE: _____	DATE: _____
PRINT NAME: _____	SSN: _____
SIGNATURE: _____	DATE: _____
PRINT NAME: _____	SSN: _____

NOTE: IF CORPORATION, TWO OFFICERS MUST SIGN. IF PARTNERSHIP, ALL GENERAL PARTNERS MUST SIGN. IF INDIVIDUAL, HUSBAND AND WIFE MUST SIGN. IF LIMITED LIABILITY COMPANY, TWO PRINCIPALS MUST SIGN.

RELEASE CERTIFICATE

(PLEASE COMPLETE IF APPLICABLE)

I/WE HEREBY CERTIFY:

1. I/WE HOLD A VALID SELLER'S PERMIT NUMBER:

2. I/WE ARE ENGAGED IN THE BUSINESS OF SELLING THE FOLLOWING TYPE OF TANGIBLE PROPERTY:

[Empty rectangular box for property description]

3. THIS CERTIFICATE IS FOR THE PURPOSE FROM

PRINCETON TECHNOLOGY, INC.

OF THE ITEM(S) LISTED IN PARAGRAPH 5 BELOW.

4. I/WE WILL RESELL THE ITEM(S) LISTED IN PARAGRAPH 5, WHICH WE ARE PURCHASING UNDER THIS RESALE CERTIFICATE IN THE FORM OF TANGIBLE PERSONAL PROPERTY IN THE REGULAR COURSE OF OUR BUSINESS OPERATIONS, AND I/WE WILL DO SO PRIOR TO MAKING ANY USE OF THE ITEM(S) OTHER THAN FOR DEMONSTRATION AND DISPLAY WHILE HOLDING THE ITEM(S) FOR SALE IN THE REGULAR COURSE OF OUR BUSINESS. I/WE UNDERSTAND THAT IF I/WE USE THE ITEM(S) PURCHASED UNDER THIS CERTIFICATE IN ANY MANNER OTHER THAN AS JUST DESCRIBED, I/WE WILL OWE USE TAX BASED ON EACH ITEM'S PURCHASE PRICE OR AS OTHERWISE PROVIDED BY LAW.

5. DESCRIPTION OF PROPERTY TO BE PURCHASED FOR RESALE:

COMPUTER HARDWARE, SOFTWARE AND COMPONENTS.

CUSTOMER
NAME AS
SHOWN ON
SELLER'S
PERMIT: _____

AUTHORIZED
SIGNATURE: _____

DATE: _____

TITLE

(FOR PRINCETON TECHNOLOGY USE ONLY)

REVIEWED BY: _____ DATE: _____

APPROVED BY: _____ DATE: _____

SALES PERSON: _____

ACCOUNTMATE#: _____

CREDIT LIMIT: _____

TERMS: _____