

Educational Development Corporation Credit Application Form

Please fill out this application completely and return it to our Sales Department

Please Submit Application to:

Email: **Sales1@edcpub.com**

Fax: (800) 743-5660

Phone: (800) 475-4522

General Business Information (Complete all fields.)		Parent/Affiliated Companies (if applicable)	
Legal Business Name		Legal Business Name	
Business Name: _____		Business Name: _____	
Street Address: _____		Street Address: _____	
City: _____	State: _____	City: _____	State: _____
Zip: _____		Zip: _____	
Phone #: () - _____		Phone #: () - _____	
Fax #: () - _____		Fax #: () - _____	
Web Address: _____		Web Address: _____	
Federal Tax ID #: _____		Dun & Bradstreet ID #: _____	
		DBA, if any: _____	
		VAT#, if any: _____	
(Note: If applicable, copy of reseller or tax exemption certificate required.)			
Type of Business: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Govt. Agency <input type="checkbox"/> Other _____			
<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Public Univ/Coll <input type="checkbox"/> Private Univ/Coll			
Years in Business: _____ Year of Inc.: _____ State of Inc.: _____			
Credit Requested \$: _____		Terms* (Net 30, Net 60, Net 90, Prepaid): _____	
<i>(*First Order must be Prepaid)</i>			
Are Purchase Orders Used? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of person responsible for purchasing: _____		Telephone: _____	Email: _____
Name of person responsible for accounts payable: _____		Telephone: _____	Email: _____

Name of Owners, Partners, or Officers and Titles if Incorporated

(Complete all fields and provide at least one owner, partner or officer.)

Name: _____	Name: _____
Title: _____	Title: _____
Phone #: () - _____	Phone #: () - _____
Email: _____	Email: _____

Trade Reference Information

(Please provide information of at **least three** companies. Do not use Baker & Taylor, Ingram, Penguin, or Random House as they will not verify Credit History.)

Name: _____	Name: _____
Contact Person: _____	Contact Person: _____
Address: _____	Address: _____
City: _____	City: _____
State: _____	State: _____
Zip: _____	Zip: _____
Phone #: () - _____	Phone #: () - _____
Fax #: () - _____	Fax #: () - _____
Email: _____	Email: _____
Account #: _____	Account #: _____
Name: _____	Name: _____
Contact Person: _____	Contact Person: _____
Address: _____	Address: _____
City: _____	City: _____
State: _____	State: _____
Zip: _____	Zip: _____
Phone #: () - _____	Phone #: () - _____
Fax #: () - _____	Fax #: () - _____
Email: _____	Email: _____
Account #: _____	Account #: _____

Bank Reference Information (Complete all fields and provide at least one reference.)

Bank Name:	_____	Bank Name:	_____
Contact Person:	_____	Contact Person:	_____
Address:	_____	Address:	_____
City:	_____	City:	_____
	State: _____		State: _____
	Zip: _____		Zip: _____
Phone #:	() - _____	Phone #:	() - _____
Fax #:	() - _____	Fax #:	() - _____
Email:	_____	Email:	_____
Checking Acct #:	_____	Checking Acct #:	_____
Savings Acct #:	_____	Savings Acct #:	_____
Loan Officer:	_____	Loan Officer:	_____
Loan #:	_____	Loan #:	_____

This application is submitted for the purpose of obtaining credit with Educational Development Corporation and is warranted to be true. By signing this application, the undersigned acknowledges that he/she is authorized to execute this application and to obligate the company to make payment in full for all amounts due according to invoice on or before the net due date. Additionally, the undersigned will be responsible for all collection costs and attorney fees, with or without lawsuit, in order to collect any delinquent moneys. The undersigned hereby authorizes Educational Development Corporation, Incorporated to make such inquiries (corporate/personal) as are necessary to obtain credit information and authorizes the bank(s) of record to release information regarding accounts.

PERSONAL GUARANTEE

The individual by signing this credit application/agreement is executing this Application on behalf of Buyer and personally guarantees, and agrees to be personally liable for failure of the performance by Buyer of, any and all of Buyers' obligations under this Application with Educational Development Corporation, including timely payment of any and all sums due to Educational Development Corporation. The personal guarantee also applies in the event that the Buyer declares Bankruptcy or applies for Bankruptcy protection.

Signature of Authorized Owner, Partner or Corporate Officer Required.

Signature of Owner, Partner or Corporate Officer	Date
_____	_____
Home Address:	Social Security Number:
_____	_____
Printed Name of Signer	Title
_____	_____

Educational Development Corporation Authorization to Release Credit Information

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In consideration of an open account arrangement with Educational Development Corporation, I hereby authorize you to release information to Educational Development Corporation. regarding credit history, checking and savings accounts, and/or loan experience. Thank you for your cooperation.

Legal Name of Company _____

DBA, if any _____

Authorized Signature _____

Title _____

Date _____