



"The Dealer Friendly Distributor"  
**(800) 546-VSSI**  
(8774)

## ACCOUNT APPLICATION

### BUSINESS INFORMATION

COMPANY NAME: \_\_\_\_\_ D.B.A: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

COMPANY TYPE:  Individual  Partnership  Corporation CA RESALE #: \_\_\_\_\_ ISSUE DATE: \_\_\_\_\_

DATE OF INCORPORATION OR ESTABLISHMENT: \_\_\_\_\_ STATE OF INCORPORATION: \_\_\_\_\_ DUNS #: \_\_\_\_\_

ACCOUNTS PAYABLE CONTACT: \_\_\_\_\_ ACCOUNTS PAYABLE PHONE: \_\_\_\_\_

### OWNERS / OFFICERS

FULL NAME: \_\_\_\_\_ FULL NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SSN: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ SSN: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

### CREDIT REFERENCES (3 Related to the security industry)

**1)** COMPANY NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**2)** COMPANY NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**3)** COMPANY NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### BANK REFERENCE

BANK NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

I (we) Consent that you may release normal credit information relative to my company, as named above to VSS, Inc.

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### WEBSITE ACCESS

To request access to the Dealer Only section of our website, please enter a 6-10 character password below. Upon approval, we will assign you a User Name and contact you via email with login information.

PASSWORD: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_



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### TERMS OF AGREEMENT

The information contained herein and which may be attached hereto is true and complete, and is provided for the purpose of inducing VSS, Inc. to establish credit for the applicant. The information contained or attached is provided by an authorized individual of the entity applying for the credit with VSS, Inc. VSS is authorized to obtain any additional information it may consider necessary for determination of such credit line. Applicant also agrees to the VSS standard terms of sale of net 30 days from the date of invoice, and agrees to pay a service charge of 1.5% per month or 18% per annum on all past due invoices. Applicant understands that in the event of any default, the undersigned shall be responsible for all costs of collection, damages and expenses including actual attorneys fees and costs, whether or not litigation is commenced. Special factory orders can not be canceled and require a 50% deposit. Returned items are subject to a 25% restocking charge. Applicant is also responsible for any fees or charges incurred as a result of credit inquiries by any reference or credit reporting agency in connection with this application.

**For all open accounts, the credit card authorization form must be completed with the credit application. If your account becomes delinquent, VSS, Inc. has the right to charge the credit card on file for the full outstanding balance.**

**If a check is returned for non-sufficient funds or any other reason other than bank error, you will automatically lose your check approval privilege.**

**All returns are for store credit only. No cash, check, or credit card refunds.**

CREDIT LINE REQUESTED: _____	EXPECTED ANNUAL PURCHASES: _____
SIGNATURE: _____	DATE: _____
NAME (print): _____	TITLE: _____

### PERSONAL GUARANTY

I hereby absolutely and unconditionally guaranty the credit account, debt or obligation of: \_\_\_\_\_  
(Enter Your Business Name)

This is a continuing guaranty and shall continue as long as credit is extended on the account, debt or obligation to proceed first against debtor or any other guarantor, and joinder of debtor or other guarantors. I further agree to pay all attorney fees, collection efforts and other expenses incurred in enforcement of the underlying obligation. In the event of litigation against me, suit may be brought in the court of Los Angeles County. This guaranty remains in effect until written notice to cancel has been sent to creditor, which will not affect existing amount owed.

SIGNATURE: _____	DATE: _____
NAME (print): _____	TITLE: _____

**Please Fax Both Pages of Completed Application to (818) 848-7374**

### BELOW FOR VSS INTERNAL USE ONLY

ACCOUNT NUMBER: _____
REFERENCES VERIFIED BY: _____ DATE: _____
CREDIT LINE ESTABLISHED: _____
AUTHORIZED BY: _____ DATE: _____
NOTES: _____
_____
_____