



CINEWORKS

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APPLICATION FOR CREDIT

Firm name _____ Phone (____) _____

Bill to: _____
Street City State Zip Code

Ship to: _____
Street City State Zip Code

Name of parent co. if subsidiary _____
Name Address Phone

Where are payments made from? _____

Proprietor, partners _____
Or officers if Name Home Address Phone
incorporated

Name Home Address Phone

Kind of business _____ Yr. established _____

At present location since _____ Is business incorporated? _____ What state _____

Credit references: (Give only names of those you buy from on open account)

Name Address Phone Account No.

Name Address Phone Account No.

Name Address Phone Account No.

Name Address Phone Account No.

Bank references:

Name Address Phone Account No.

Name Address Phone Account No.

Terms: PAYMENT DUE 30 DAYS FOLLOWING THE INVOICE DATE. It is agreed that we will pay service finance charges of 1½% per month (18% Annual Interest Rate) on any unpaid previous balance after deducting payments and credits. In the event that this account becomes delinquent, then the entire balance plus any, and all accrued service charges will be due, and payable immediately. Applicant also agrees, that if collection procedures are instituted to enforce collections on this account, to pay any, and all necessary collection costs.

Company: _____ Date: _____

Signed: _____ Title: _____

If corporation – must be signed by a corporate officer



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