



# CREDIT APPLICATION

25242 Arctic Ocean Drive

Lake Forest, Ca 92630

Phone: 949-399-4500

Fax: 949-930-3401

Date: \_\_\_\_\_

Tax ID# \_\_\_\_\_

Tax Exempt # \_\_\_\_\_

(If Applicable)

Amount Requested \_\_\_\_\_

Amount Approved \_\_\_\_\_

## Business Information

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## Contact Information

Names of Owners or Officers

Title

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Accounts Payable

Contact Info

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title

E-mail

## Business References

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_



# CREDIT APPLICATION

Bank Name: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Bank Officer: \_\_\_\_\_ Acct# \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Credit Terms & Conditions

Applicant hereby applies to Quantum Fuel Systems LLC ("Quantum") for credit and specifically consents to Quantum's investigating Applicant's credit history and authorizes the financial institutions listed in this credit application to release bank account information to the extent necessary to verify the information contained herein. If credit is extended applicant acknowledges and agrees that payment is due upon receipt of invoice. Invoices are considered past due at 31 days. In the event of failure to timely pay any invoice, the unpaid balance shall accrue interest at the rate of 1.5% per month. Applicant will be charged a \$30.00 fee for any checks returned by the applicant's bank. Applicant further agrees to pay all collection costs, including attorney's fees and court cost, if it becomes necessary for Quantum to pursue legal action Quantum, at its discretion, may place any account with a delinquent balance on a cash in advance, limited credit, or cancel all charge privileges if there is a reason to believe the account will not be paid as it becomes due. The undersigned and all officers or partners, individually promise to pay and personally guarantee that all money's due to Quantum will be paid in full.

### Authorization

Quantum is hereby authorized to contact any references or banks listed. It is understood that any information so obtained will be solely for the purposes of granting credit.

### Applicant Signature

The undersigned hereby certifies that the above information is true, accurate and complete.

X \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
 Please Print Name

Title: \_\_\_\_\_