



2412 Lynx Lane  
 Orlando, Florida 32804  
 407.956.5900 ☎ 407.956.5927 Fax  
 www.cgxradios.com



**Credit Application**

Rep Name		Christy Associates   Ron Wallace Associates   Brand Spec	
Account Name			
<b>Billing Address</b>			
City, State, Zip			
<b>Shipping Address</b>			
City, State, Zip			
Phone		Fax	
		<b>Name</b>	<b>Email</b>
Primary Contact			
President / CEO			
Purchasing Contact			
<b>Accounting Contact</b>			
<b>Additional Contact</b>			
Purchase Order Required?			

**Company Financial Information**

**Corporation**                       **Partnership**                       **Proprietorship**

**Public**     **Private**                       **Small Business**                       **Disadvantaged Business**

Incorporated under the State laws of \_\_\_\_\_

Federal ID # \_\_\_\_\_ Type of Business \_\_\_\_\_

Please attach a current Florida Annual Resale Certificate for Sales Tax in order to be exempt from sales tax.



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### Credit References

**Bank Reference**

Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Fax # \_\_\_\_\_

Account Number \_\_\_\_\_ Type of Account \_\_\_\_\_

**Trade Reference**

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

Account Number \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Trade Reference**

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

Account Number \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Trade Reference**

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

Account Number \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail Address \_\_\_\_\_

.....

I (we) agree that:

The information provided is for the purpose of obtaining credit and is warranted to be true. A representative of Christy Distribution Center, Inc. dba CGX Radios, dba ChannelGistix is authorized to investigate the references listed as they pertain to my (our) credit and financial responsibility. The terms of sale are net 30 days from the date of each invoice. All payments received after 30 days shall be subject to a finance charge at the rate of 1.5% per month or any lesser charge reflecting the maximum amount legally permissible.

The undersigned agrees and understands that should collection of this account require litigation that Christy Distribution Center, Inc. dba CGX Radios, dba ChannelGistix may elect judicial proceedings and you will pay reasonable court costs and attorney fees as permitted by law.

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Please note that the credit application must be signed by an officer of the company applying, and all information included herein will be kept confidential.