



METAL MARKETPLACE INTERNATIONAL®

Celebrate With Gold® • Celebrate With Silver®

740 Sansom Street 5th Floor Philadelphia, PA 19106

www.metalmarketplace.com

(Toll Free) 800-523-9191

(Local) 215-592-8777

(Fax) 215-592-8195

CREDIT APPLICATION

Please FAX completed application to (215) 592-8195.

Thank you for your interest in doing business with METAL MARKETPLACE INTERNATIONAL. Please provide all requested credit information and return the application via fax or mail. All information will be held in strict confidence.

This application is for: ___ Credit ___ Company Check Privilege ___ Computer Check ___ Visa/MasterCard, American Express, Discover

Credit Line Requested: ___ up to \$1000 ___ \$1000 to \$2500 ___ \$2500 to \$5000 ___ \$5000 ___ other \$ _____

Conditions of Credit or Company Check Privileges

(Buyer, i.e. Owner or agent of Owner must read and sign this form).

If granted credit, the BUYER must pay invoice balance within 30 days of invoice date. All terms are 30 days unless documentation of extension is received from SELLER (Metal Marketplace International.)

Buyer agrees to pay SELLER monthly interest of 1.5% on all unpaid balances 30 days after invoice date.

If SELLER takes legal action to collect any unpaid balance due from BUYER, the BUYER shall be responsible for and promptly pay SELLER all expenses incurred in the collection process. BUYER shall pay SELLER any fees and charges resulting from non-payable checks returned for any reason.

The validity and interpretation of this Agreement shall be construed in accordance with, and governed by the laws of the Commonwealth of Pennsylvania. All claims, disputes or causes of action relating to or arising out of this Agreement shall be brought, heard and resolved solely and exclusively by and in a court of law in Philadelphia, Pennsylvania. Each of the parties hereto agrees to submit to the jurisdiction of this court, which shall be proper for all purposes of this Agreement.

The BUYER (Owner of business entity applying for credit or company check privilege) is required to notify SELLER of any change in corporation, partnership, or ownership.

I (Owner) have read, and agree to all of the above terms and conditions. _____

Signature

Date

PERSONAL GUARANTEE

Date _____

I, _____ residing at _____
(your name) (home address)

for good and valuable consideration including the extension of credit which I hereby acknowledge as having been received do hereby personally guarantee and promise to pay any obligation to METAL MARKETPLACE INTERNATIONAL on demand for any indebtedness owed or due METAL MARKETPLACE INTERNATIONAL.

This guarantee shall be a continuing and irrevocable guarantee and indemnity to METAL MARKETPLACE INTERNATIONAL. Further, I hereby subrogate any indebtedness of _____ which it may have to me to the indebtedness of METAL MARKETPLACE INTERNATIONAL. (business name)

I do hereby waive notice of default, non-payment and notice thereof and to jury trial and consent to all renewals of extension of credit.

Signature _____



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CREDIT APPLICATION

/ (Please type or print clearly)

COMPLETE BUSINESS NAME (area code) Telephone E-mail Address
(Please include full corporate name and/or DBA name)

Street Suite Number City State Zip Code

Business Type (Check all that apply)

_____ Wholesaler _____ Dept.Stores _____ Retailer _____ Jobber

Type of Business

_____ Corporation _____ Partnership _____ Sole proprietorship

How long has the above company been in business? _____ Resale Tax # _____

What is your rating? Jewelers Board of Trade (JBT #) _____ Dun & Bradstreet _____

Is your store insured? _____ Policy Name _____ Policy Number _____

Amount of insurance _____ Type of coverage _____

Buyer's Name _____ Accounts Payable Manager _____

(1) Principal Owner's Name _____ Social Security # _____

Home Address _____
Street City State Zip Code

Driver's License # _____ State _____

Home phone number _____ Signature _____

Closest relative not living in your household-- Relationship _____

Name _____ Phone _____

Home Address _____
Street City State Zip Code

(2) Principal Owner's Name _____

Home Address _____
Street City State Zip Code

Driver's License # _____ State _____

Home phone number _____ Signature _____

Closest relative not living in your household-- Relationship _____

Name _____ Phone _____

Home Address _____
Street City State Zip Code



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BANK REFERENCES

(1) Bank Name	_____	Contact	_____
Address	_____	Title	_____
	_____	Phone	_____
Branch Name	_____	Contact	_____
Address	_____	Title	_____
	_____	Phone	_____

Type of account:
Savings account # _____ Checking account # _____ Business loan account # _____

(1) Bank Name	_____	Contact	_____
Address	_____	Title	_____
	_____	Phone	_____
Branch Name	_____	Contact	_____
Address	_____	Title	_____
	_____	Phone	_____

Type of account:
Savings account # _____ Checking account # _____ Business loan account # _____

Most banks & business firms require an authorized signature to release any information for credit inquires. For this reason please sign the release form where indicated: I, the undersigned, authorize the release of all credit history requested by Metal Marketplace International, for the purpose of establishing credit with the above mentioned company.

Company Name _____
Signature _____
Date _____

TRADE REFERENCES

ACTIVE TRADE REFERENCES ONLY : Current credit accounts with karat gold jewelry suppliers only.

(We do not accept credit references from diamond and watch companies .)

	Merchandise Ordered	Approximate Annual purchases	Metal Marketplace, Int. Office use only
(1) Company Name	Chain _____	_____	_____
Address	Charm _____	_____	_____
	Rope _____	_____	_____
Phone	Earrings _____	_____	_____
Contact	Links _____	_____	_____
Fax #			
Account #			
(2) Company Name	Chain _____	_____	_____
Address	Charm _____	_____	_____
	Rope _____	_____	_____
Phone	Earrings _____	_____	_____
Contact	Links _____	_____	_____
Fax #			
Account #			
(3) Company Name	Chain _____	_____	_____
Address	Charm _____	_____	_____
	Rope _____	_____	_____
Phone	Earrings _____	_____	_____
Contact	Links _____	_____	_____
Fax #			
Account #			