



New Dealer Application

Thank you for selecting Mesa Safe Company as your security products supplier. We wish to provide to you in the most professional manner as possible. To establish your business, we would like for you to provide us with some information. Please complete the information requested below and fax or email it back to us. Thank you.

Company Information:

Company Name:							
DBA:							
Billing Address:							
City:		State:		Zip:			
Shipping Address: <small>if different from above</small>							
City:		State:		Zip:			
Phone:				Fax:			
Email Address:				Web Site:			

Owners or Officers:

Name:				Title:			
Name:				Title:			
<u>Years In Business:</u>							

Please describe your business:

Name of business:							
Products offered:							
Year Established:		Inventory Y/N		Separate Location Y/N			
URL:		How Many sku's do you Inventory?		Preferred payment Method			

Resale Information:

I hereby certify that I hold valid seller's permit #: _____
 Issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling _____
 _____ that the tangible personal property described herein which I
 shall purchase from Mesa Safe Company will be resold by me in the form of tangible personal
 property; PROVIDED, however, that in the event any of such property is used for any purpose
 other than retention, demonstration, or display while holding it for sale in the regular course of
 business, it is understood that I am required by the Sales and Use Tax Law to report any pay for
 the tax, measure by the purchase price of such property.

Description of property to be purchased: _____

Dated: _____ Signature: _____

At: _____ By and Title: _____

Bank Reference:

Bank Name:						
Address:						
City:		State:		Zip:		
Phone:		Fax:				
Account Number:						

Business Reference:

Business Name:						
Address:						
City:		State:		Zip:		
Phone:		Fax:				
Product or Service Purchased:						

Business Name:						
Address:						
City:		State:		Zip:		
Phone:		Fax:				
Product or Service Purchased:						

Business Name:						
Address:						
City:		State:		Zip:		
Phone:		Fax:				
Product or Service Purchased:						

We understand and agree that all invoices are due on a net 30-day basis. We also understand and agree that Mesa Safe Company has our permission to conduct a credit investigation including but not limited to bank and trade references, and credit bureaus. In the event we default in our payments, we agree that Mesa Safe Company may assess us, and we agree to pay, reasonable late charges (not to exceed 2% per month, as permitted by law), attorney fees, collection agency fees and other costs associated with their collection efforts. The laws of the State Of California shall govern our relationship, including jurisdiction.

In consideration of Mesa Safe Company extending credit to the Company shown on this application, the undersigned jointly and severally agree to be personally liable for the payment of any amounts owing to Mesa Safe Company.

Signature: _____ Title: _____
Printed Name: _____ Date: _____

Personal Guaranty

In consideration of credit heretofore or hereafter granted by Mesa Safe, ("Creditor") to _____ ("Debtor"), the undersigned hereby conditionally guarantees to Creditor full payment when due of any indebtedness of Debtor for (i) goods heretofore or hereafter sold or consigned to, or work-in-process identified for, Debtor by Creditor or (ii) services heretofore or hereafter performed for Debtor by Creditor, together with lawful interest from date due and all expenses of collection, including court costs and reasonable attorney's fees.

This guaranty shall be directly enforceable against the undersigned without first resorting to any remedies against Debtor. This guarantee shall be a continuing guarantee and shall remain in full force and in effect until undersigned gives written notice, by certified or registered mail, to Creditor to extend no further credit on the security of this guaranty. Such notice shall be ineffective as to any obligation (billed or unbilled) existing at the time such notice is received by Creditor. The undersigned hereby assents to all terms and conditions made or to be made with Creditor by Debtor. Any indulgences, renewals or extensions of any indebtedness guaranteed hereby shall not release the undersigned as a guarantor hereunder.

Reference to undersigned includes each and all of the undersigned and they shall be jointly and severally liable thereunder. This guaranty shall be the benefit of the Creditor, its successors and shall be binding upon the undersigned and their assigns, heirs, executors and other legal representatives.

Intending To Be Legally Bound Hereby, the undersigned have executed this guaranty this

_____ day of _____, 20_____.

X _____
Guarantor _____ Address

X _____
Guarantor _____ Address

X _____
Witness _____ Address

Mesa Safe Company

Net Terms/Credit Card Authorization

Continued for (Company Name): _____

Applying for Net Terms:

For your convenience, Mesa Safe offers several different ways to pay invoices from your Net 30 account.

- Pay by check mailed to 337 W Freedom Ave Orange, CA 92865.
- Check by fax/email. Send a copy of your printed check and we can process it same day at no extra charge.
- ACH. If you have an ACH account set up, we will accept payment via ACH at no extra charge.
- Wire transfer - \$12 fee. Account information given upon request. Please include wire transfer fee with each payment.
- Credit Card – 3% convenience fee will be charged to each transaction.

We anticipate we will require a Credit Line of \$ _____ to handle our purchasing levels.

Signature: _____ Title: _____

Printed Name: _____ Date: _____

To Leave a Credit Card on File for Purchase:

By completing and signing the below, I authorize Mesa Safe Company to keep this card on file for all purchases made by me or _____ (company name). I also acknowledge and authorize the 3% convenience fee. Once processed, Mesa Safe/Securitybase.com will furnish a receipt of charges for my records.

Card Type: _____

Card Number: _____ Expiration Date: _____

CVV (3-Digit # on back of card): _____

Name as it appears on the card: _____

Billing Address of Card (including zip): _____

Printed Name: _____

Signature: _____

If you do not wish to keep a credit card on file, you can order online using your Vendor Login information, or you can put the credit card information on every PO submitted

We are authorizing the Release of any credit information regarding our accounts needed by **Mesa Safe Company**. This information will be used explicitly for the establishment of an Open Account and Credit Line. This information is to be kept in the strictest of confidence.

Sign:		Print:	
Title:		Company:	

[Please fill out one for each of your Business References]

[Fill Out Top Portion Only]

ATTENTION: ACCOUNTING DEPARTMENT: Urgent Please Reply

FROM: Mesa Safe **FAX:** (714) 627-4016 **ATTENTION:** Pamela Perry

To: _____ Fax # _____

Regarding: _____ Account# _____

To Whom It May Concern:

The above customer is applying for a Credit Line with us and has given your company as a reference. Kindly provide us with the following information and return this form to:

FAX No. (714) 627-4016 ATTENTION: Pamela Perry

For any questions, Please call us at (714) 202-8000 x 108

DATE OPENED: _____

DATE OF LAST SALE: _____

TERMS: _____

CREDIT LIMIT: _____

AMOUNT NOW OWING: _____

AMOUNT PAST DUE: _____

MANNER OF PAYMENT: **(YES or NO)**

SLOW: _____

DAYS: _____

SECURED: _____

SENT TO COLLECTIONS: _____

RATING: _____

AVERAGE DAYS TO PAY: _____

Comments: _____

We are authorizing the Release of any credit information regarding our accounts needed by **Mesa Safe Company**. This information will be used explicitly for the establishment of an Open Account and Credit Line. This information is to be kept in the strictest of confidence.

Sign:		Print:	
Title:		Company:	

[Please fill this out for your Bank Reference]

[Fill Out Top Portion Only]

ATTENTION: ACCOUNTING DEPARTMENT: Urgent Please Reply

FROM: Mesa Safe **FAX:** (714) 627-4016 **ATTENTION:** Pamela Perry

To: _____ **Fax #** _____

Regarding: _____ **ACCOUNT #** _____

To Whom It May Concern:

The above customer is applying for a Credit Line with us and has given your bank as a reference. Kindly provide us with the following information and return this form to:

Fax No. (714)-627-4016 ATTENTION: Pamela Perry

For any questions, Please call us at Tel. NO. (714) 202-8000 x 108

DATE OPENED: _____

DATE OF LAST SALE: _____

AVE. BALANCE MAINT.: _____

AMOUNT NOW OWING: _____

NSF CHECKS: _____

CREDIT LIMIT: _____

AMOUNT PAST DUE: _____

SLOW: _____

DAYS: _____

MANNER OF PAYMENT:
(YES or NO)

SECURED: _____

SENT TO COLLECTIONS: _____

RATING: _____

AVERAGE DAYS TO PAY: _____

Comments: _____
