



DISTRIBUTOR CREDIT APPLICATION

Company Information

Physical

7202 E Cave Creek Rd, Suite 3A
Carefree, AZ 85377

US Postal

PO Box 2281
Carefree, AZ 85377

brillianceled.com | 800.867.2108

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Website: _____

Years in Business: _____ # of Locations: _____

Approximate Time as a Brilliance Distributor: _____

Approximate Total Sales Volume as a Brilliance Distributor: _____

Desired Credit Limit: _____

Accounts Payable Email Address (all invoices will be emailed) : _____

Resale #: _____ Federal ID / EIN #: _____

(Please attach document)

Bank Information

Name of Bank: _____ Account #: _____

Address: _____

Contact: _____ Phone: _____ Fax: _____

Trade References (minimum 3 required)

Company Name: _____ Contact #: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact #: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Trade References (continued)

Company Name: _____ Contact #: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact #: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Company Name: _____ Contact #: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Distributor has reviewed and understands the Brilliance **“Terms and Conditions”** and other **“Info”** on the Brilliance website - **brillianceled.com/info**

Authorized Representative/Officer: _____
Signature Date

Personal Guarantee

In consideration for Brilliance LED, LLC extending credit to _____ (hereafter referred to as the “Company”) the undersigned individual hereby personally, individually and unconditionally guarantees to Brilliance the payment of any obligation of the Company and hereby agrees to be bound to pay on demand any sum which may become due to Brilliance by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty, and indemnity for such indebtedness of the Company. I do hereby waive notice of default, nonpayment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed. The Officer(s) of the Company must sign below as individuals - signatures only, no corporate titles.

Date: _____ Name: _____

(Printed name of person guaranteeing payment - NO TITLE)

Home Address: _____

Home Phone #: _____ SS#: _____

Signature of person guaranteeing payment: _____

Name of business whose account is guaranteed: _____