



A Division of Automotive Aftermarket, Inc

GENERAL OFFICES - 10425 S. LA CIENEGA BLVD, LOS ANGELES, CA 90045. PH: 310 703 5700, FAX: 310 703 5750

WEEKLY CREDIT APPLICATION

[ ] REGULAR WEEKLY [ ] WEEKLY BATCH

I understand that I'm authorized to sign for all purchases from Completes Plus on a weekly basis. The billing period for Weekly Accounts is Monday through Sunday. Regular Weekly statements will be mailed or emailed on Monday for the prior week's purchases. Weekly Batch statements will be emailed every Tuesday for the prior week's purchases.

Statements are payable in full every Friday.

An RGA is issued for all returns. After verification credits are processed the same day.

These credits only apply to the current week's statement.

Past due accounts will be placed on credit hold on Monday.

A service charge of \$20.00 will be added for any check returned by your bank.

LEGAL NAME: \_\_\_\_\_

DBA: \_\_\_\_\_ PHONE: \_\_\_\_\_ YEAR IN BUSINESS: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

\_\_\_\_\_ CORPORATION \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ SOLE OWNER

RESALE NUMBER \_\_\_\_\_ EMAIL \_\_\_\_\_

OWNER NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_

TRADE REFERENCES: (Only list those you buy from on a weekly or monthly account)

NAME: \_\_\_\_\_ ACCT NO: \_\_\_\_\_ PHONE: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

ACCOUNT NO.....

CP SALESMAN.....