



IMAX CORPORATION CREDIT APPLICATION FORM
 PO Box 472188 Tulsa, OK 74147 • (918) 254-2700 • Fax (918) 254-2754
CONFIDENTIAL

GENERAL INFORMATION

Company Name		Date / /
dba		
Address		City, State & Zip
Business Phone	Fax	Email
Years in Business	DNB No.	Ever Filed Bankruptcy <input type="checkbox"/> No <input type="checkbox"/> Yes Year _____
Annual Revenue	Tax ID	Bus. Type <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC
Requested Credit Limit:	\$	A/P Contact Name

Principals or Officers

Name	Title	Home Ph
Address		City, State & Zip
Name	Title	Home Ph
Address		City, State & Zip

References (Banking)

Bank Name	Account No.
Address	Phone
Bank Officer	Fax

References (Trade Suppliers excluding utilities)

☐ Please check box if references are attached.

Name	Phone	Fax
Address	Account #	Email

Name	Phone	Fax
Address	Account #	Email

Name	Phone	Fax
Address	Account #	Email

Name	Phone	Fax
Address	Account #	Email

Name	Phone	Fax
Address	Account #	Email

Imax Corporation is hereby authorized to inquire and receive any and all information about our banking and vendor relationships. A photocopy or facsimile copy of this authorization shall be valid as an original.

The undersigned, being a principle, director or officer of the aforesaid business, individually, jointly and severally guarantees the payment of any and all future obligations of the said business which may be owing to IMAX Corporation upon demand including reasonable attorney's fees and all costs and other expenses incurred by IMAX Corporation in collecting an indebtedness of the aforesaid business. This is a continuing guarantee and may be revoked only in writing by delivery to IMAX Corporation at the above address via certified mail, but such revocation will be effective only as to transactions entered into after IMAX Corporation's receipt of the notice of revocation. Payment Terms for all sales are Net 30. Charges are made in accordance with IMAX Corporation's current price list and include freight FOB Tulsa, OK. Information included in this application is for use by IMAX Corporation in determining the amount and condition of credit to be extended. IMAX Corporation may also utilize other sources of credit, which it considers necessary in making this determination. All past due accounts will be subject to 18% finance charge and accounts over 30 days late will lose their net 30 status. Discount or special offers will be subject to revocation for delinquent accounts.

Corporate Officer/Principle Signature Only	Printed Name	Title	Date
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Note: Application must be signed even when reference sheet is attached.

For Internal Use Only

Customer#:	D:	PH:
Sales Rep:	L:	
Approved By:	Ins:	
Date:	Credit Limit:	Terms: