



APPLICATION FOR INTERNATIONAL ACCOUNT

All information will be kept in strict confidence and used only by Kroll International, LLC.
THIS APPLICATION MAY BE REJECTED DUE TO INCOMPLETE INFORMATION. Please allow 7-10 business days for processing.

COMPANY INFORMATION

Full Company Name: _____
Street Address: _____ Phone: _____
City/Providence/Territory: _____ Fax: _____
Zip : _____ Country : _____ Website: _____
Email Address : _____ Alternate Phone: _____
How long has the company been in business?: _____ At Current Address?: _____
Form of Organization (Check One): Proprietorship Partnership Corporation
Store Type (Check One): Distribution Retail Store Catalog Online/Internet Home-Based

OFFICER OF THE COMPANY

Name: _____ Title: _____
National ID or Passport #: _____ Email: _____
Home Address: _____
Alternate Phone: _____ Alternate Fax: _____

TERMS/BANK REFERENCE

Terms: COD Certified International Prepay Credit Card *If applicable

Bank Reference:

Company Name: _____ Account #: _____
Address: _____
Contact: _____ Phone: _____ Fax: _____

TRADE REFERENCES

(Please list **three** CURRENT credit references and provide COMPLETE contact information):

1. Company Name: _____ Account #: _____ Contact: _____
Phone: _____ Fax: _____ e-mail: _____
2. Company Name: _____ Account #: _____ Contact: _____
Phone: _____ Fax: _____ e-mail: _____
3. Company Name: _____ Account #: _____ Contact: _____
Phone: _____ Fax: _____ e-mail: _____

Confirmation of Information: Accuracy and Release of Authority to Verify

I hereby certify that the information in this Application for Open Account is correct. The information included in this Credit Application is for use by Kroll International, LLC (Kroll®) in determining the amount and conditions of credit to be extended. I understand that Kroll may also utilize the other sources of credit which it considers necessary in making this determination. Further, I hereby authorize the Bank and Trade References listed in this Credit Application to release the information necessary to assist Kroll in establishing terms. I promise to pay for each purchase within the assigned terms. For all accounts past due, I agree to a 1.5% service charge on the unpaid monthly balance, which is an annual rate of 18%. Default will occur if payment due is not received in sixty (60) days after the date of the invoice. I further assume responsibility for all purchasing agents and employees of the undersigned until written notice to the contrary is given.

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

**Fax completed application along with a copy of your LEGAL SALES LICENSE to:
586-739-0600 (Attention Internationals) or email to customerservice@krollcorp.com**



APPLICATION FOR INTERNATIONAL ACCOUNT (CONTINUED)

Wire Transfers Available. Please email internationalsales@krollcorp.com for more information once you become a dealer.

CREDIT CARD INFORMATION

Credit Card Information (if applicable): Card Type: (Check One) American Express Visa Mastercard

Company Name: _____

Credit Card Number: _____ - _____ - _____ - _____ Expiration Date: (MMYY) ____ / ____

Card Verification Number: _____ Cardholder Name (as it appears on card): _____

Billing Address: _____

Signature:
I agree to have the total amount of the invoice billed to my above listed credit card. I further agree to pay the total amount in accordance with the Card Issuer Agreement.
X _____
 Check here to authorize Kroll International, LLC to keep this card on file for future use.

GUARANTEE INFORMATION

****This portion of the application is required.**
Kroll® International, LLC Guarantee: Federal ID# 20-1135584

Guarantee made this _____ day of _____, 20____, by _____ (Hereinafter referred to as "Guarantor"), to Kroll International, LLC (Hereinafter referred to as "Creditor"), with respect to terms to be extended to _____ (Hereinafter referred to as "Debtor").

Guarantor is responsible for all financial transactions, company/certified and/or personal checks, and all debts incurred by Debtor to Creditor. Debtor agreed to pay within the terms as determined by Creditor.

This is a continuing guarantee. If Debtor defaults in payment of any indebtedness, Guarantor will guarantee the prompt repayment to the Creditor the amount due. Default will occur if payment due is not revived within sixty (60) days after the date of the invoice. Guarantor shall pay Creditor its reasonable attorneys' fee and all costs by it in collecting on past-due invoices.

This guarantee shall be interpreted pursuant to the laws of the State of Michigan (United States of America). Revocation shall not affect indebtedness incurred prior to receipt of written notice.

I represent that this formation provided on this guarantee is an application for credit is true and accurate. I future authorize Kroll International, LLC to inquire as the credit worthiness of the Guarantor and/or Debtor. In witness whereof the Guarantor has executed this guarantee agreement at:

Address: _____

City: _____ State/Province/Territory: _____

Country: _____ Zip: _____

Date: _____ By (Guarantor): _____

Signature: _____

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