



# Confidence Analytics, LLC

14797 NE 95<sup>th</sup> ST  
Redmond, WA 98052  
(206) 743-8843  
info@conflabs.com

## NET-30 AGREEMENT

### BUSINESS

Business Name: \_\_\_\_\_  
UBI #: \_\_\_\_\_  
LCB License #: \_\_\_\_\_

### OWNERS/PARTNERS/OFFICERS

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_

### BANKING

Bank: \_\_\_\_\_ Acct #: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Acct Type:  Checking  Savings  Loan

Has this business (or any owner, partner, or corporate officer listed on this form, ever filed for bankruptcy?  Yes  No

### TRADE REFERENCES

(Do not list COD or Credit Card Only Accounts)

Company: \_\_\_\_\_ Acct #: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Company: \_\_\_\_\_ Acct #: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Company: \_\_\_\_\_ Acct #: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

## TERMS OF AGREEMENT

In consideration of extension of credit and/or net-30 billing by Confidence Analytics, LLC, the applicate agrees, acknowledges, and warranties the following terms:

### *Reference Check*

1. The applicant hereby authorizes Confidence Analytics, LLC to contact the references listed on this form for purposes of assessing the credit and financial standing of the applicant business. The applicant represents and warranties the information provided is true and correct, and attests the applicant business's financial responsibility, willingness to pay all invoices within 30 days of the date of invoice or as otherwise agreed upon. Applicant acknowledges official invoices will be sent via email and they accept responsibility for providing correct and up to date contact information for the correct party to send invoices over for payment.

### *Collections*

2. In the event of default in the payment of any amount due, the applicant business agrees and warranties payment of all outstanding finance charges, reasonable collection costs (including agency, attorney, and court costs/fess) incurred. Venue of any suit shall be laid in King County.

### *Change of Ownership*

3. The applicant business agrees to notify Confidence Analytics, LLC promptly in writing of any changes in ownership conducted under the account name, and agrees to the liability for all charges to the applicant business conducted under the account name unless and until Confidence Analytics, LLC receives said written notice of change.

### *Signature*

Authorized Signature: \_\_\_\_\_  
 Printed Name of Signator: \_\_\_\_\_  
 Title of Signator: \_\_\_\_\_  
 Date: \_\_\_\_\_