

United Communications Corporation

888-763-7550 Tel

888-763-7549 Fax

Company Name: _____

Person responsible for: Ordering _____ Accts Payable: _____

Street Address: _____

City, State, Zip: _____

Phone _____ Fax: _____

Billing Address: _____

Legal Entity: Proprietorship Partnership Corporation
Type of Business: Radio Common Carrier Private Carrier Paging Other Agent _____

Tax Exemption Status: Tax Exempt (provide tax certificate) Charge Sales Tax
Please complete accurately as no credits will be issued to adjust for taxes charged

Credit Line Requested: \$ _____ Terms Requested: _____

Date Business Started: _____ D&B Number: _____

Principals:

Name	Home Address	SS#	Title	% Ownership

Please list any affiliate companies or subsidiaries:

Name: _____ Comments: _____

Name: _____ Comments: _____

Has company, principles, officers or affiliates ever filed for bankruptcy? Yes No

Payment shall be made within agreed upon terms after the date of the invoice for each product, accessory c
Any invoiced amount that is not paid within these terms will be considered delinquent. Based on acceptable credit
and collections practices, United Communications Corporation (UCC) is entitled to past due interest or a late payment
charge on the delinquent balance outstanding, not to exceed 2.0% per month on the outstanding balance.
Any past due interest or late payment charge will become due and payable immediately at UCC's discretion.
The buyer also agrees to reimburse UCC for all legal fees and expenses incurred in collecting any amount due hereunder.

The undersigned certifies that the above information on this credit application is correct to the best of your knowledge.
The undersigned also agrees to the terms set forth in the above mentioned interest clause.
The undersigned also authorizes the references, listed on page two, to release credit information to UCC.

Signature _____ Title _____ Date _____

United Communications Corporation

Bank References:

Bank Name: _____

Address: _____

Telephone: _____ Fax: _____

Account Number: _____ Checking Savings

Account Number: _____ Checking Savings

Do you have Loans or Lines of Credit? Yes No

If so, what type & amount available? _____

Trade References: (MUST include Fax Numbers and Account numbers)

Do not use Motorola, Tescos, Brightpoint or credit cards as they will not provide credit information.

Name: _____

Address: _____

Telephone: _____ Fax: _____

Contact: _____ Account# _____

Name: _____

Address: _____

Telephone: _____ Fax: _____

Contact: _____ Account# _____

Name: _____

Address: _____

Telephone: _____ Fax: _____

Contact: _____ Account# _____

Name: _____

Address: _____

Telephone: _____ Fax: _____

Contact: _____ Account# _____

Authorized Signature: _____

(Signature needed for release of credit information)

United Communications Corporation

Credit Card Authorization Form

Company Name _____

Name as on Card _____

Card # _____

Verification Number (3 digits for Visa/MC 4 Digits AMEX) _____

Card Type: MasterCard Visa AmEx

Card Expiration Date _____

Billing address for credit card: _____

Model Purchased _____

Customer # _____ Invoice # _____

SubTotal _____ (not including shipping)

TOTAL _____

Signature: _____

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.

Internal use Only
Date of authorization _____
Amount of authorization _____
Authorization Number _____
Initials _____