



**Digital Knights**  
electronics, Inc.

**Preferred VENDOR  
APPLICATION**

" Good People will be Remembered "

**Join us in  
Upgrading Food Industry from BW to COLOR Technology**

**Company Information:**

Billing Address:

Shipping Address:

_____	_____
_____	_____
_____	_____
_____	_____

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Main Company Contact: \_\_\_\_\_ Email: \_\_\_\_\_

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

Federal ID: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Date Company was established: \_\_\_\_\_ Date of Incorporation \_\_\_\_\_

DUNS No: \_\_\_\_\_

Officer: \_\_\_\_\_ Position: \_\_\_\_\_

Signature of Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Do you want to Credit Card Account?: YES NO

Do you want a NET-30 Account? YES NO

\*\*\* To facilitate prompt payments and support lower prices offered we require a credit card as a precaution against late payments. If you have any concerns please contact us about it.

Credit card information: Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Card Type: \_\_\_\_\_

Card Num: \_\_\_\_\_

Expiration: \_\_\_\_\_



# Digital Knights electronics, Inc.

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**Bank Reference:**

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

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Contact: \_\_\_\_\_

Account: \_\_\_\_\_

**Four Trade References:**

Name:

Address:

\_\_\_\_\_

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Phone:

Account:

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Name:

Address:

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Phone:

Account:

Contact:

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Which Franchises or Restaurants do you provide service to or have accounts with:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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Do you know of equipment you would like us to make a generic or custom control for?

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What is the Territory you service or would like to provide service:

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What Service does your company provide (Heating, Refrigeration, Parts, Timers, Equipment, etc.)

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Are you interested in participating in retrofitting the country or rolling out new equipment installations? YES NO

Digital Knights Electronics, Inc. owns various patents and proprietary information, any additions, changes or modifications to the equipment in the field becomes proprietary information and is the sole property of Digital Knights Electronics, Inc.

Digital Knights Electronics, Inc. is given permission to run a credit and/or background check to verify the information stated.

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
Title: \_\_\_\_\_

Please fax the three pages to (949)830-3194 and if you are located in California the resale certificate on the 4<sup>th</sup> page. Thank you for taking the time...

## CALIFORNIA RESALE CERTIFICATE

\_\_\_\_\_  
(Name of Purchaser)

\_\_\_\_\_  
(Address of Purchaser)

**I HEREBY CERTIFY:** That I hold valid seller's permit No. \_\_\_\_\_  
issued pursuant to the

**Sales and Use Tax Law;** That I am engaged in the business of selling \_\_\_\_\_

\_\_\_\_\_  
**that the tangible personal property described herein which I shall purchase from:** Digital Knights Electronics, Inc.

will be resold by me in the form of tangible personal property; provided, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property or other authorized amount. Description of property to be purchased:

\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_

(Signature of Purchaser or Authorized Agent)

\_\_\_\_\_  
(Title)