



INTERNATIONAL BROADCASTING GROUP

Confidential Credit Application

Account Executive: _____ Requested Credit Limit: \$ _____

Market/Station: _____ Date of Initial Schedule: - -

TO PROCESS YOUR REQUEST FOR CREDIT ACCOMMODATION, THIS APPLICATION MUST BE COMPLETELY FILLED OUT AND SIGNED BY AN OFFICER OF YOUR COMPANY. APPLICATIONS MUST BE RETURNED TO THE INTERNATIONAL BROADCASTING GROUP TEN (10) DAYS PRIOR TO START OF SCHEDULE. FAILURE TO COMPLY WILL RESULT IN CASH-IN-ADVANCE STATUS.

Agency Name:	Telephone Number: () -
Business Address (Street, State, Zip Code):	
Mailing Address (if different than Business Address):	

Type of Business Entity: Individual Proprietorship Corporation - in the state of _____

Client Name, Address & Contact (if single advertiser buy)

Description of business activity:

PRINCIPAL OWNERS AND/OR OFFICER OF THE COMPANY

Name/Title	Address/Phone Number	Social Security #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

AUTHORIZATION FOR BANK AND OTHER CREDIT REFERENCE CHECKS

To induce International Broadcasting Group, Inc. to extend credit for advertising under credit sale terms as stated on invoices, we authorize International Broadcasting Group, Inc. to contact the references and banks listed below. We also understand that this information will be held in strict confidence and be used solely for the consideration of extension of credit to us.

SIGNED: _____	TITLE: _____
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MEDIA / TRADE REFERENCES

Name	High Credit
Address	
City	State / Zip
Telephone () -	Account #
Contact Name	Date Last Advertised

Name	High Credit
Address	
City	State / Zip
Telephone () -	Account #
Contact Name	Date Last Advertised

Name	High Credit
Address	
City	State / Zip
Telephone () -	Account #
Contact Name	Date Last Advertised

CREDIT INFORMATION

BANK REFERENCES

Name	Branch
Address	
City	State / Zip
Account #	
Contact Name	Telephone () -

Name	Branch
Address	
City	State / Zip
Account #	
Contact Name	Telephone () -

Federal Tax ID #:	Dun & Bradstreet #:
Have you ever filed Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please give date and description of proceedings	Date: _____
Description: _____	

Person Responsible for payment: _____	Telephone () -
Payment Responsibility:	
<input type="checkbox"/> Agency / Advertiser (joint & severally liable)	<input type="checkbox"/> Advertiser (direct billing & liability)

Have you ever advertised with any International Broadcasting Group affiliate? If so, please list below:
1. _____
2. _____
3. _____

TERMS AND CONDITIONS OF CREDIT

1. Payments are due 30 (THIRTY) days from invoice date.
2. Notwithstanding any other provisions of the contract, the agency and/or the advertiser are jointly and severally liable to the station for payments due hereunder, and the station may hold either liable.
3. In the event that any portion of an invoice is in dispute, the IBG must be notified in writing within fifteen (15) days of the invoice date. Applicant agrees that the undisputed portion of the invoice will be paid on time. A mutually agreeable settlement will be negotiated promptly on the portion in question.
4. If payment is not made within a reasonable period, applicant agrees to pay collection costs and legal fees as incurred by International Broadcasting Group, Inc.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I HEREBY AGREE TO THE TERMS AND CONDITIONS OF CREDIT CONTAINED HEREIN.

Name _____ Signature _____

Title _____ Date _____