## **Credit Application**

**Company Information** 

| Legal Business Name:             |                      |               | Phone#:                                  |               |        | Fax#:       |          |        |                |      |
|----------------------------------|----------------------|---------------|--|---------------|--------|-------------|----------|--------|----------------|------|
| Billing Address:                 |                      |               | 1  |               |        |             | <u> </u> |        |                |      |
| City:                            |                      |               | Sta                                      | ate:          |        |             | Zip      | ):     |                |      |
| Years In Business: Company Type: |                      |               | □ Partnership □ Corporation □ Individual |               |        | Fed. ID# or |          | or SS# | <del>!</del> : |      |
| Email Address:                   |                      | ,             |  |               |        | Website:    | II.      |        |                |      |
| Owners/Execu                     | utive Office         | rs Informatio | on                                       |               |        |             |          |        |                |      |
| Full Name:                       |                      |               |  |               | Title: |             |          |        |                |      |
| Address:                         |                      |               |  |               |        |             |          |        |                |      |
| City:                            | State:               |               | Zip:                                     |               | Phon   | Phone:      |          |        | Fax:           |      |
| Full Name:                       |                      |               |  |               | Title: |             |          |        |                |      |
| Address:                         |                      |               |  |               |        |             |          |        |                |      |
| City:                            | State:               |               | Zip:                                     |               | Phon   | e:          |          |        | Fax:           |      |
| Full Name:                       |                      |               |  | Title:        |        |             |          |        |                |      |
| Address:                         |                      |               |  |               |        |             |          |        |                |      |
| City:                            | State:               |               | Zip:                                     |               | Phon   | e:          |          |        | Fax:           |      |
| Tundo Cuodit I                   | ) - <b>f</b> - w - w |               |  |               |        |             |          |        |                |      |
| 1. Company Name:                 | rejerences           |               | Co                                       | ontact Name:  |        |             |          | Phone  | :              |      |
| Address:                         |                      |               | Cit                                      | ty:           |        | Sta         | ate:     |        |                | Zip: |
| 2. Company Name:                 |                      |               | Co                                       | ontact Name:  |        |             |          | Phone  | :              |      |
| Address:                         |                      |               | Cit                                      | ty:           |        | Sta         | ate:     |        |                | Zip: |
| 3. Company Name:                 |                      |               | Co                                       | Contact Name: |        |             |          | Phone: |                |      |
| Address:                         |                      |               | Cit                                      | ty:           |        | Sta         | ate:     |        |                | Zip: |

## Credit Application Continued...

| Bank Name:   | Accou   | nt #:   | □ Checki   | ☐ Checking ☐ Savings ☐ Loan   |  |  |  |
|--|---|---|--|---|--|--|--|
| Address:   | City:   |   | State:   | Zip:  |  |  |  |
| Contact Name:  | Phone   | · #:  | Email Addro  | Email Address:  |  |  |  |
| Accounts Payable C   | ontact  |   | ·  |   |  |  |  |
| Name:  |   | Title:  |  |   |  |  |  |
| Phone#:  | Fax#:   |   | Email Address:   | ldress:   |  |  |  |
| per month. Should App  | ys from date of invoice. Ou<br>blicant default on terms and   | l legal action bec  | omes necessary, th   | e Applicant agrees to   |  |  |  |
| Credit Terms are 30 day<br>per month. Should App<br>pay all collection expen<br>Applicant will notify Co<br>as soon as changes occ<br>release of all pertinent                             | ys from date of invoice. Ou   | I legal action become costs, court costs, court costs any changes in cotted is warranted processing the ap                      | omes necessary, the<br>ts, filing fees, and a<br>company name, add<br>to be true and App<br>plicant's request fo                       | e Applicant agrees to attorney's fees. dress, or phone number licant authorizes the                         |  |  |  |
| Credit Terms are 30 day<br>per month. Should App<br>pay all collection expen<br>Applicant will notify Co<br>as soon as changes occ<br>release of all pertinent<br>records, trade credit re | ys from date of invoice. Our plicant default on terms and ses including administrative re 4 Solutions (in writing) of ur. The information submit information necessary for preferences, commercial credit | I legal action become costs, court costs, court costs any changes in cotted is warranted processing the apt treports, and other | omes necessary, the<br>ts, filing fees, and a<br>company name, add<br>to be true and App<br>plicant's request fo<br>er financial data. | e Applicant agrees to attorney's fees. dress, or phone numbe licant authorizes the or credit including bank |  |  |  |
| Credit Terms are 30 day<br>per month. Should App<br>pay all collection expen<br>Applicant will notify Co<br>as soon as changes occ<br>release of all pertinent<br>records, trade credit re | ys from date of invoice. Our plicant default on terms and ses including administrative re 4 Solutions (in writing) of ur. The information submit information necessary for plerences, commercial credit   | I legal action become costs, court costs, court costs any changes in cotted is warranted processing the ap                      | omes necessary, the<br>ts, filing fees, and a<br>company name, add<br>to be true and App<br>plicant's request fo<br>er financial data. | e Applicant agrees to attorney's fees. dress, or phone number licant authorizes the                         |  |  |  |