



- CREDIT APPLICATION -

Company's Legal Name _____ Division/Subsidiary Name _____

Trade Name, dba Name, etc. _____ Acct Payable Contact _____

Mailing Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ E-Mail _____

Proprietorship _____ Partnership _____ Corporation _____ Other _____

Open Credit Line Desired \$ _____ Year Established _____ Total Employees _____

Annual Sales \$ _____ Financial Statement Enclosed _____ Will Be Forwarded On _____

Principal Owner/Officer

Name _____ Title _____

Bank Reference

Name Of Bank _____ Address _____ City / State _____

Phone Number _____ Manager Name _____ Account Number _____

Commercial Credit References

1) Name _____ City/State _____

Phone _____ Fax _____ Account # _____

2) Name _____ City/State _____

Phone _____ Fax _____ Account # _____

3) Name _____ City/State _____

Phone _____ Fax _____ Account # _____

- GENERAL PROVISIONS -

This application and the information herein is a request for the extension of credit for commercial business use only. The applicant authorizes the above named creditor to obtain and update as creditor deems necessary a written or oral credit report from any credit reporting agency. The applicant further authorizes any bank or commercial business with whom the applicant is doing or has done any type of business to give any and all necessary information to the creditor.

Company Name: _____

Owner / Officer Name: (Please Print) _____ Title: _____

Owner / Officer Signature: _____ Date: _____