

## Credit Application

### GENERAL

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

Trade Name or D.B.A: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Federal ID #: \_\_\_\_\_ Tax Exempt #: \_\_\_\_\_

Type of Business: Corporation { } S-Corp { } LLC { } Partnership { } Individual { } Years In Business? \_\_\_\_\_

Do you use Purchase Orders: Yes { } No { }

Name of Person(s) Authorized to Sign Purchase Orders: \_\_\_\_\_

Name of Person(s) Responsible for Accounts Payable: \_\_\_\_\_

### OFFICER(S)/OWNER(S) INFORMATION:

Full Name: \_\_\_\_\_ SSN#: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Full Name: \_\_\_\_\_ SSN#: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Signature of Officer / Owner :** \_\_\_\_\_

### BANK INFORMATION:

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

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

Checking Account #: \_\_\_\_\_ Savings Account #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### TRADE REFERNECES:

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contact/Phone: \_\_\_\_\_ Fax: \_\_\_\_\_