

CREDIT APPLICATION

Company Name					
Street address					
City			State		Zip Code
Mailing Address					
Street address			Phone		
City			State		Zip Code
Credit Line Requested	\$ / Month		Website		
The company is a	□ Corporation	□ Partnership	□ Pro	oprietorship	
Years in Business		Tax ID (EIN)#	Busii	ness Licence	#
President / Owner					
Name			Phone		
E-mail			Fax		
Buyer					
Name			Phone		
Email			Fax		
Accounts Payable					
Name			Phone		
Email			Fax		
Bank Information					
Name of Bank			Account No.		
Street Address			Contact Name		
City			State		Zip Code
Phone			Fax		·
Trade References					
1. Company Name			Phone		
Contact Name			Fax		
Street Address			E-mail		
City			State		Zip Code
2. Company Name			Phone		
Contact Name			Fax		
Street Address			E-mail		
City			State		Zip Code
3. Company Name			Phone		
Contact Name			Fax		
Street Address			E-mail		
City			State		Zip Code
Signature of Owner			Date /	1	
Owner Name (Print)			Title	·	
· /					