# CREDIT APPLICATION

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| --- |
| Last: First: Title: |
| Name of Business: Fax |
| Address:    City: State: Zip: Phone: |
| Accounts Payable Contact: Email: |
| **Company Information** |
| Type Business: In Business since: |
| Legal Form Under Which Business Operates:     Corporation  Partnership  Proprietorship |
| **Bank References** |
| Institution Name: Account Rep: |
| Checking / Savings Account No: Date Opened: |

# CREDIT APPLICATION

Trade References

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| --- |
| Company Name: Contact Name:      Address:      Phone: Fax: Account # |
| Company Name: Contact Name:      Address:      Phone: Fax: Account # |
| Company Name: Contact Name:      Address:      Phone: Fax: Account # |

I hereby certify that the information herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein

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Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name