

BUSINESS CREDIT APPLICATION

TO ENSURE PROMPT PROCESSING OF APPLICATION, PLEASE PRINT CLEARLY

1.Company Information

Business Name		DBA (If Applicable	.) :)		Federal Tax ID#	
Physical Address			City		State	Zip
Billing Address (if diffe	ront		City		State	Zip
bining Address (if diffe	rent)		City		State	Ζιρ
Business Phone	Ext Alternate	Phone	Fax	Email A	Address	
Date Business Started	A/P Conta	act Person	A/P Phone Nu	umber A/P En	nail Address	
2.Type of Business (Please Select One)		3.Billing In	formation		
□ Corporation	Partnership	Government	Purchase Order Required		Monthly Statement Required?	
Sole Proprietor		Other	□ Job Name Required		🗆 Yes 🛛 No	
4.Applicant Informa	tion – Personal, Office	er, Partner or Member (Contact Informa	ation		
Name	Title	SSN	Name	Title		SSN
Address		Phone	Address			Phone
City	State	Zip	City		State	Zip
,		·	,			·
5.Trade References			1			
Business Name		Contact Name	F	hone Number	Email Add	ress
					21110117100	
Street Address		City		State		Zip
Date Account Opened		Credit Limit		Current Balance		
Business Name		Contact Name	F	hone Number	Email Add	ress
Street Address		City		State		Zip
Street Address		City		State		Σip
Date Account Opened	Credit Limit		Current Balance			
Business Name		Contact Name	г	hone Number	Email Add	racc
		Contact NdHe	F		Lindii Auu	1733
Street Address		City		State		Zip
		- /				
Date Account Opened		Credit Limit	Current Balance			

6.Bank Reference									
Bank Name	Phone N		Phone N	Number	Account Number				
Address	City	State	Zip	Contact Name	Contact Email Address				
7.Tax Requirements									
□ All purchases are "TAXABLE"		Tax Exempt □Yes [\Box No (If yes, a valid Tax Exempt Certificate must be provided)					

I hereby certify that the information contained 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 **b** 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.

Signature

Print Name

Date