



**CREDIT APPLICATION**

Legal Name \_\_\_\_\_ DBA \_\_\_\_\_

Corporation \_\_\_\_\_ Sole Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ Other \_\_\_\_\_

Address \_\_\_\_\_

Ph # ( ) \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State (Provi.) \_\_\_\_\_ Postal Code \_\_\_\_\_ Unit # \_\_\_\_\_  
 Fax # ( ) \_\_\_\_\_ E-mail \_\_\_\_\_ Web Site \_\_\_\_\_

Principal Owner/ Officer: \_\_\_\_\_ Employer Federal ID No. \_\_\_\_\_ Tax Exempt. No. \_\_\_\_\_

Authorized Purchaser: \_\_\_\_\_ Accounts payable Contact: \_\_\_\_\_ Years In business \_\_\_\_\_

Parent Company Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Ph # ( ) \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State (Provi.) \_\_\_\_\_ Postal Code \_\_\_\_\_ Unit # \_\_\_\_\_  
 Fax # ( ) \_\_\_\_\_ Accounts payable Contact: \_\_\_\_\_

**Information on Co-owners if Sales Less than \$1million**

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence \_\_\_\_\_

**Bank Information**

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

Address \_\_\_\_\_

Contact \_\_\_\_\_

Ph# \_\_\_\_\_ Fax# \_\_\_\_\_

**Trade References**

Company Name \_\_\_\_\_

Address \_\_\_\_\_

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

Contact \_\_\_\_\_ Title \_\_\_\_\_

Ph# \_\_\_\_\_ Fax# \_\_\_\_\_

**Credit Type**

Monthly Credit Required (USD) \$ \_\_\_\_\_

Net Terms \_\_\_\_\_ COD Company Check \_\_\_\_\_

Wire Transfer \_\_\_\_\_ Factoring \_\_\_\_\_

Credit Card # \_\_\_\_\_ (Fee may apply)

Visa \_\_\_ Master Card \_\_\_ AMEX \_\_\_ Exp Date \_\_\_\_\_

**For Internal Use Only**

Credit \_\_\_\_\_ score \_\_\_\_\_

Age \_\_\_\_\_ nc \_\_\_\_\_ y \_\_\_\_\_

Notes \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

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

Contact \_\_\_\_\_ Title \_\_\_\_\_

Ph# \_\_\_\_\_ Fax# \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

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

Contact \_\_\_\_\_ Title \_\_\_\_\_

Ph# \_\_\_\_\_ Fax# \_\_\_\_\_

Approved \_\_\_\_\_ By \_\_\_\_\_

Approval No. \_\_\_\_\_ Date \_\_\_\_\_

Account \_\_\_\_\_ No. \_\_\_\_\_

Credit Line \_\_\_\_\_

Sales Rep No. \_\_\_\_\_

I hereby apply for a credit account. I warrant the information shown here is true and the information given is for the purposes of obtaining goods or services on credit. Credit terms are net 15 days\* from Invoice date(s) and agree to pay interest charges of 2% per month (24% per annum) on past due balance. Applicant further agrees to pay all collection fees, court costs, and attorney's fee of any balance due pursues collection through an attorney.

I hereby authorize the person or firm to whom this application is made, credit bureau, other investigative agency employed by such person, to investigate the references herein listed or statements, or other data obtained from me, or any other person pertaining to my credit or financial responsibilities. I agree in my capacity of an officer to make myself liable and personally responsible for all and any indebtedness of the firm. The debt may be on open account, by C.O.D. or any other method of credit extension. Note: Claims arising from invoices must be made within seven working days. (\*subject to approval)

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_