



CREDIT APPLICATION

Business Information

| | | |
|---------------------|----------------|----------------|
| Legal Business Name | Trade Name-DBA | Year Started |
| Billing Address | City | State Zip Code |
| Shipping Address | City | State Zip Code |
| Tax I.D. Number | Phone | Email |

Type of Business: Corporation LLC Partnership Proprietorship

Company Officer/Owner Name: _____

Home Address: _____ City: _____ State: ____ Zip: _____

Do you require a purchase order# before we accept an order? Yes No

| | |
|------------|---------------------------|
| AP Contact | AP Email |
| AP Phone | Credit Limit Requested \$ |

Bank References

| | | |
|---------|--------------|----------------|
| Name | Contact Name | Account Number |
| Address | Phone | Email |

Trade References

| | | |
|---------|--------------|-------------|
| 1. Name | Contact Name | Account No. |
| Address | Phone | Email |
| 2. Name | Contact Name | Account No. |
| Address | Phone | Email |
| 3. Name | Contact Name | Account No. |
| Address | Phone | Email |

The above information is provided for the purpose of extending credit to our company on payment terms of net 30. To the best of our knowledge and belief, the information is accurate and may be relied upon in making a credit decision. We authorize our bank and suppliers to furnish you any information necessary to complete your evaluation of our credit history.

Authorized Signature _____ Printed Signature _____

Title _____ Date _____