

# APPLICATION FOR CREDIT

TO \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DATE \_\_\_\_\_

WE WISH TO OPEN AN ACCOUNT WITH YOUR COMPANY AND SUBMIT THE FOLLOWING INFORMATION TO ENABLE YOU TO OBTAIN A CREDIT HISTORY FOR THAT PURPOSE.

FIRM NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

FAX ( ) \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_

CORPORATION  PARTNERSHIP  PROPRIETORSHIP  YEARS ESTABLISHED \_\_\_\_\_

PRINCIPALS: (NAMES OF OFFICERS OR OWNERS)

POSITION \_\_\_\_\_

POSITION \_\_\_\_\_

POSITION \_\_\_\_\_

## TRADE REFERENCES

1.	NAME	YOUR ACCOUNT NUMBER		
	ADDRESS			
	CITY	STATE	ZIP	PHONE ( )
2.	NAME	YOUR ACCOUNT NUMBER		
	ADDRESS			
	CITY	STATE	ZIP	PHONE ( )
3.	NAME	YOUR ACCOUNT NUMBER		
	ADDRESS			
	CITY	STATE	ZIP	PHONE ( )

B A N K	NAME	PERSON TO CONTACT		
	ADDRESS			
	CITY	STATE	ZIP	PHONE ( )

BY \_\_\_\_\_

DO NOT WRITE BELOW				FOR OFFICE USE ONLY	
TRADE REF. NO.	HIGH CREDIT	NOW OWING	TERMS	HOW LONG SOLD	REMARKS
1.					
2.					
3.					

CREDIT DEPARTMENT