

# CREDIT APPLICATION

COMPANY: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

INVOICE TO: \_\_\_\_\_ SHIP TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CREDIT CONTACT: \_\_\_\_\_

**PRINCIPALS**

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_ YEARS IN BUSINESS: \_\_\_\_\_ NUMBER OF EMPLOYEES: \_\_\_\_\_

**BANK INFO**

BANK: \_\_\_\_\_ BRANCH: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

CONTACT/OFFICER: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

TAX CERTIFICATION: \_\_\_\_\_ TAX NUMBER: \_\_\_\_\_

LOCAL TRADE REFERENCES						
NAME	TELEPHONE	HOW LONG SOLD	HIGH CREDIT	NOW DUE	PAST DUE	TERMS DISC.
1.						
2.						
3.						
4.						

MISC. INFO: \_\_\_\_\_

HAVE YOU CONTACTED A SALES REPRESENTATIVE, IF SO WHO?: \_\_\_\_\_

CREDIT LIMIT: _____	TERMS: _____
CONTROLLER APPROVAL: _____	DATE: _____
SALES PERSON: _____	ACCOUNT #: _____
CREDIT CONTACT: _____	PASSWORD: _____

**SERVICE CHARGES**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_