



CREDIT APPLICATION

Company Name: _____	D&B # _____
<u>Billing Address</u> _____	Business Type:
_____	Sole Prop. _____
_____	Partnership _____
Phone: _____ Fax: _____	Corp/State _____
Number of Years in business: _____	

Name and address of individuals or partners – Name/Title/Phone

1. _____

2. _____

Person to contact regarding Purchase Orders/Invoices/Payments

_____ Phone # _____

Bank Reference including Name/Address/Account#/Contact Person and Phone

Trade References including Name/Address/Contact Person/Phone and/or Fax

1. _____

2. _____

3. _____

The above information is herewith submitted for the purpose of opening an account and I/we do hereby certify this information to be true.

Signed: _____ Title/Date _____

For Office Use Only

Terms _____