



CREDIT APPLICATION

Business

Company Name: _____

Address: _____

City: _____ State: ____ County: _____ Zip: _____

County Sales Tax: _____ State Sales Tax: _____

Email: _____ Phone: _____

Officers

Name/Title	Home Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____

Authorized Buyers

Trade References (complete information required)

1) Name: _____ Phone: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

2) Name: _____ Phone: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

3) Name: _____ Phone: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Bank References

Bank: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Account #: _____ Contact Officer: _____

For Office Use Only

Credit Limit: _____

Company Name: _____

Date: _____

By: _____

I/We hereby acknowledge receipt of the terms and conditions of sale. I/We further authorize the above cited references to supply pertinent information as may be required to determine our credit capabilities.

Signature _____ Title: _____ Date: _____

Signature _____ Title: _____ Date: _____