



CREDIT APPLICATION

Firm Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

City: _____ State: _____ Zip Code: _____

Type of Business:

Corporation Partnership

Limited Partnership Proprietorship

Limited Liability Co.

If Incorporated, What State? _____ Federal ID Number _____

Officers/Principals (If Partnership or Proprietorship, Social Security Number and home address are required).

Name/Title: _____ SS#: _____

Address: _____ State: _____ Zip Code: _____

Name/Title: _____ SS#: _____

Address: _____ State: _____ Zip Code: _____

How long has company been in operation? _____ Under present control? _____

References:

Bank: _____ Phone Number: _____

Address: _____

Banking Officer: _____ Account Number: _____

Trade References:

Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

Name: _____ Phone Number: _____

Address: _____ Fax Number: _____