



Credit Application

COMPANY INFORMATION

Company Name _____ M.C. # _____
 Parent Company If Subsidiary _____
 Billing Address _____
 Phone _____ Fax _____ Web Site _____
 Physical Address _____
 Type of Business _____ Year Established _____ Year of Incorporation _____
 Number of Employees _____ Annual Sales _____ Credit Line Desired _____

Ownership (Circle One) Sole Proprietorship Private Corporation Partnership Public Corporation Government

COMPANY OFFICERS AND CONTACT INFORMATION

President _____ **Email Address** _____
 Phone _____ Fax _____
Vice President _____ **Email Address** _____
 Phone _____ Fax _____
Owner _____ **Email Address** _____
 Phone _____ Fax _____
A/P Manager _____ **Email Address** _____
 Phone _____ Fax _____

BANKING INFORMATION

Bank _____ Branch _____ Account Number _____
 Phone _____ Personal Banker _____ D&B# _____

TRADE INFORMATION

| Company Name | Address | Phone / Fax | Email Address |
|--------------|---------|-------------|---------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |
| 4. _____ | _____ | _____ | _____ |

TERMS: NET 30 DAYS FROM DATE OF INVOICE

CONDITIONS: In the event that these terms are not met, a 1.5% per month finance charge will be charged. If it becomes necessary, in our opinion, to engage assistance in the collection of any past due monies, customer shall pay all collections and court costs, including trial & appeal costs. Failure to keep your account up to date will/can result in pick-up and delivery service to be suspended.

President/Owner Signature (ONLY) _____ **Date** _____
Corporate Officer (ONLY) _____ **Title** _____