Credit Application

Name/Address First: Middle Initial: Title Name of Business: Tax I.D. Number Address: City: ZIP: State: Phone: **Company Information** Type of Business: In Business Since: Legal Form Under Which Business Operates: Corporation Partnership Proprietorship If Division/Subsidiary, Name of Parent Company: In Business Since: Name of Controller or Accounts Payable Contact (REQUIRED): Title: Email Address (REQUIRED): Address: State: ZIP: Phone: City: Are you tax Exempt? Yes No If yes, you are Tax Exempt, please include a copy of your tax exempt certificate with your application. **Bank References** Institution Name: Institution Name: Institution Name: Checking Account #: Savings Account #: Home Equity Loan: Loan Balance: Address: Address: Address: Phone: Phone: Phone: Trade References Company Name: Company Name: Company Name: Contact Name: Contact Name: Contact Name: Address: Address: Address: Phone: Phone: Phone: Account Opened Since: Account Opened Since: Account Opened Since: Credit Limit: Credit Limit: Credit Limit: Current Balance: Current Balance: Current Balance: I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and the conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is

Signature Date

being applied for in order to verify the information contained herein.