



APPLICATION FOR CREDIT

Firm Name: _____

Trade Name: _____

Billing Address: _____

Shipping Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Fax #: _____

Form Of Business: Sole Proprietorship _____

Partnership: _____

Corporation: _____

State Incorporated: _____ Year Incorporated: _____

D & B #: _____ Federal I.D. #: _____

Kind Of Business: _____

Officers: President: _____

Vice President: _____

Secretary/Treasurer: _____

Controller: _____

Accounts Payable: _____

Bank Name: _____

Bank Address: _____

Bank Phone #: _____

List Below the names of the principle firms with whom you have established credit.

Table with 6 columns: Firm Name, Phone #, Street Address, City, State, Zip Code. Rows 1, 2, 3.