



CORPORATE CREDIT APPLICATION

Company Name: _____
 Billing Address: _____
 City: _____ State: _____ Zip: _____
 Business Ph: _____ Fax: _____
 Federal ID# _____ DUNS# _____
 Contact Name: _____ Title: _____
 Type of Business: _____ Yrs. in Business: _____

BANK REFERENCES

Bank Name: _____ Account#: _____
 Address: _____ City: _____ State: _____ Zip: _____

 Phone: _____ Fax: _____

TRADE REFERENCES

Company Name: _____ Address: _____ _____ Phone: _____ Account Opened Since: _____ Credit Limit: _____ Current Balance: _____	Company Name: _____ Address: _____ _____ Phone: _____ Account Opened Since: _____ Credit Limit: _____ Current Balance: _____	Company Name: _____ Address: _____ _____ Phone: _____ Account Opened Since: _____ Credit Limit: _____ 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 used to determine the amount and 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 being applied for in order to verify the information contained herein.

 Signature Date: _____