

**CREDIT APPLICATION**

COMPANY NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
MAILING P.O. BOX ADDRESS \_\_\_\_\_  
SHIPPING ADDRESS \_\_\_\_\_  
ACCOUNTS PAYABLE CONTACT \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
YEARS IN BUSINESS \_\_\_\_\_ SALES TAX EXEMPT NUMBER \_\_\_\_\_  
NUMBER OF EMPLOYEES \_\_\_\_\_ DO YOU REQUIRE PURCHASE ORDER NUMBERS \_\_\_\_\_

**GENERAL BUSINESS INFORMATION**

**OFFICERS OR PRINCIPALS**

NAME \_\_\_\_\_ HOME TELEPHONE \_\_\_\_\_  
HOME ADDRESS \_\_\_\_\_  
NAME \_\_\_\_\_ HOME TELEPHONE \_\_\_\_\_  
HOME ADDRESS \_\_\_\_\_

**BANK REFERENCES**

BANK NAME \_\_\_\_\_ BANK OFFICER \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
CHECKING ACCOUNT # \_\_\_\_\_ SAVINGS ACCOUNT # \_\_\_\_\_

**PRESENT SUPPLIER REFERENCES**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE \_\_\_\_\_

WE CERTIFY THAT ALL INFORMATION ON THIS FORM IS CORRECT, AND THAT WE FULLY UNDERSTAND YOUR CREDIT TERMS, AND AGREE TO THE PROPER PAYMENT IN CONSIDERATION OF EXTENDED CREDIT.

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_