



**CREDIT APPLICATION INFORMATION:**

*Company Name:* \_\_\_\_\_

*A/P Contact:* \_\_\_\_\_

*Billing Address:* \_\_\_\_\_

*Physical Address:* \_\_\_\_\_

*Telephone / Fax or Email* \_\_\_\_\_ / \_\_\_\_\_

*Nature of Business:* \_\_\_\_\_

*Date Established:* \_\_\_\_\_

*License Number / State:* \_\_\_\_\_

*Federal Tax ID:* \_\_\_\_\_

*Corporate Officers: (Name, Title, Contact Number)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Bank References:*

*Name of Bank / Branch:* \_\_\_\_\_

*- Address* \_\_\_\_\_

*- Contact* \_\_\_\_\_

*- Telephone Number* \_\_\_\_\_

*Credit References:*

*(Name, Address, Contact Number)*

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\_\_\_\_\_  
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*We certify that all information on this form is correct and that we fully understand our credit terms and agree to the proper payment in consideration of extended credit.*

Credit Terms: *Net 30 days from Invoice Date.*

Finance Charges: *1.5% monthly (18% per annum) applied to balances over 30 days.*

*Officer Signature*

*Title*

*Date*

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