



CREDIT APPLICATION

Date: _____

Credit Limit Requested: \$ _____

Terms Granted: _____ (office use only) Credit Limit Granted: \$ _____

Company Information

Full Legal Name _____ Phone # _____

DBA (if different) _____ Fax # _____

Address _____ Email _____

City _____ State _____ Zip Code _____

Website _____

Type of Company: ___ Corporation ___ Partnership ___ Limited Liability Company

___ Sole Proprietor ___ Other (Specify) _____

Federal Tax ID# or Social Security Number _____ How long in business? _____

State where incorporated _____ Number of employees _____

ASI Number _____ PPAI Number _____ UPIC Number _____

Ownership Information

Please complete the below information for all officers, partners, members and owners. Please attach a separate sheet of paper if more space is required.

| Name | Title | Ownership % | Home Address | Home Phone # |
|-------|-------|-------------|--------------|--------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Bank Reference

Name of Bank: _____ Bank Address: _____ Phone # _____

Contact Name: _____ Account # _____ Type of Account _____



Trade References

Please list three significant business relationships.

| Name | Address | Phone # | Contact |
|-------|---------|---------|---------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Mortgage Holder/Landlord Information

| | |
|--|--------------------------|
| Do you rent or own premises that your business occupies? _____ | Years at location: _____ |
| Mortgage Holder/Landlord Name: _____ | Contact Person: _____ |
| Address: _____ | Phone #: _____ |

Has the company or any officer, partner, member or owner ever filed for bankruptcy? Yes/No (if yes, attach detail)

Has your company or any company officer, partner, member or owner been associated with as an officer, partner, member or owner ever had credit with us before? Yes/No? (if yes under what name _____).

By signing below, I certify that I have the authority to bind the company to this agreement, and that I agree to creditor's terms of sale of merchandise. I also agree and accept that the credit limit and credit terms may be changed or withdrawn at the sole discretion of the creditor. Creditor shall include creditor subsidiaries, related companies, and assigns.

The information given herein is offered as part of a request by the applicant for an extension of credit for commercial business use. The information provided is represented by the applicant to be true, correct and complete. The Applicant authorizes Creditor to investigate al credit references and other sources pertaining to our credit and financial responsibility. The undersigned authorizes its banks and trade creditors to provide Creditor with complete information for the purpose of credit evaluation. The applicant understands that all past due balances will be subject to 1.5% per month finance charge. Charges outstanding after 60 days of delivery are subject to collection. Collection or arbitration expenses, attorney's fees, and court costs will be borne by the purchaser.

Applicant Company Name: _____

Printed Name: _____

Signature: _____ Title: _____ Date: _____