



CREDIT APPLICATION

(please fill in any/all applicable information)

COMPANY NAME OR INSTITUTION: _____

ADDRESS: _____

TELEPHONE #: _____ FAX # _____

DATE OF INCORPORATION: _____

NATURE OF BUSINESS: _____

SHAREHOLDERS/OWNERS/PARTNERS:

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

BANK:

Bank: _____ Address: _____

Account #: _____ Phone: _____ Contact: _____

CREDIT REFERENCES:

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

ACCOUNTS PAYABLE CONTACT (important): _____

SIGNATURE: _____ DATE: _____