



# CUSTOMER APPLICATION FOR CREDIT

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## APPLICANT INFORMATION

Legal Company Name: \_\_\_\_\_ Legal Status \_\_\_\_\_

Business Name (if different): \_\_\_\_\_ Corporation: \_\_\_\_\_

Address: \_\_\_\_\_ Partnership: \_\_\_\_\_

City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Proprietorship: \_\_\_\_\_

Postal Code/Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Principle(s) Owner(s)	Title
1 _____	_____
2 _____	_____
3 _____	_____

Bank: \_\_\_\_\_ Account # \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Tax Exemption # \_\_\_\_\_ Financial Statement: Yes  No

How Long in Business: \_\_\_\_\_ Monthly Credit Limit Requested \$ \_\_\_\_\_

Property Owned Yes  No  Mortgage From: \_\_\_\_\_

Property Leased Yes  No  Leased From: \_\_\_\_\_

Affiliated Companies: \_\_\_\_\_ Phone # \_\_\_\_\_ Purchase Orders Req. Yes  No

## TRADE REFERENCES - (DO NOT INCLUDE MONTHLY UTILITIES, RENTALS ETC.)

Supplier and City	Phone	Fax
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____

I/We \_\_\_\_\_ and \_\_\_\_\_ of \_\_\_\_\_ apply to you for credit for the supply of service and materials in accordance with the application for credit concurrently made. I/We will jointly and severally indemnify you, pay your account within your terms of balance in full within thirty (30) days of invoice date and to pay service charges on overdue accounts. I/We understand and consent to you obtaining a consumer report containing personal and/or credit information in connection with this transaction.

Authorized Signatory Name (Please Print):	Date:	Authorized Signature:
_____	_____	_____
_____	_____	_____
_____	_____	_____

## CREDIT DEPARTMENT USE ONLY:

Amount Approved: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Credit Approved By: \_\_\_\_\_ Customer Number Assigned: \_\_\_\_\_

Account Type: \_\_\_\_\_ Sales Representative: \_\_\_\_\_

Comments: \_\_\_\_\_

Account Entered By: \_\_\_\_\_ Date: \_\_\_\_\_