



CREDIT APPLICATION

Company Name: _____
Contact Name: _____
Phone: _____
Fax: _____
Address: _____
Mailing Address (if different): _____
Accounts Payable Contact and Phone #: _____

Type of Business: _____ Corp. _____ Individual _____ Other
SS# or Fed I.D. #: _____ **Years in Business:** _____
Taxable: _____ Yes _____ No
(if no, please include tax exempt certificate.)

Dunn and Bradstreet: _____
Is a purchase order number required? ___ Yes _____ No

Please list 3 trade references:

Company: _____
Contact: _____ Phone: _____ Fax: _____
Company: _____
Contact: _____ Phone: _____ Fax: _____
Company: _____
Contact: _____ Phone: _____ Fax: _____

Bank Name: _____
Account #: _____
Phone #: _____

The undersigned certifies that the information provided is correct and agrees to abide by the terms of the invoice. Any other terms must be pre-approved.

Signature Printed Name

Title Date

Fax Credit Application to 218-353-7720 or call 281-353-7711