



**APPLICATION FOR CREDIT**

**BY**

NAME OF FIRM OR INDIVIDUAL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ YEARS AT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

**TO**

CREDIT MANAGER: \_\_\_\_\_

OUR NORMAL CREDIT TERMS: \_\_\_\_\_

The following information must be provided. It will be held in the strictest confidence.

**OWNERSHIP**

Corporation    Check here if inc. within the past 12 months    Partnership    Individual

Credit References	Complete Address	Phone	E-mail
-------------------	------------------	-------	--------

1- \_\_\_\_\_

2- \_\_\_\_\_

3- \_\_\_\_\_

**FINANCE**

**Bank Officer or Department**

Business Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Date: \_\_\_\_\_ Signed: \_\_\_\_\_ Title: \_\_\_\_\_

**Do not write in the space below**

**VERIFICATION**

Reference checked by: \_\_\_\_\_ Credit approved by: \_\_\_\_\_

Reference results: \_\_\_\_\_ Credit refused by: \_\_\_\_\_