



Credit Application

Business Name _____ Line of Credit Requested \$ _____

Phone (_____) _____ Fax (_____) _____

Address _____ For Past _____ years

Shipping Address _____

D/B/A _____ Federal Tax ID# _____

Former Business Address (if applicable) _____

Type of Business _____ Date Established _____ How long in Business _____

Mortgage holder/Landlord _____

Address _____ Phone # _____

Does State, County, or City require a License? Yes No If Yes, License # _____

OWNERSHIP: Sole Proprietorship Partnership Corporation

PRINCIPAL: _____
(NAME) (Title) (SS#)

PRINCIPAL: _____
(NAME) (Title) (SS#)

PRINCIPAL: _____
(NAME) (Title) (SS#)

PRINCIPAL: _____
(NAME) (Title) (SS#)

TRADE REFERENCES:

NAME ADDRESS/PHONE#

_____	_____
_____	_____
_____	_____
_____	_____



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BANK REFERENCES:

_____	_____	_____	_____
(Name)	(Address)	(Acct #)	(contact)
_____	_____	_____	_____
(Name)	(Address)	(Acct #)	(contact)
_____	_____	_____	_____
(Name)	(Address)	(Acct #)	(contact)

No. of Employees _____ Est. Annual sales _____ Sales Area _____

Has the firm or any of it's principals ever been Bankrupt? Yes No

If Yes, explain _____

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

In consideration for the extension of credit, said business promises to pay for all purchases within **net 30 days terms** agreed and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

(Name of Business)

_____ (Print Name) _____ (Title) _____ (Signature)

_____ (Print Name) _____ (Title) _____ (Signature)

CREDIT DEPARTMENT USE ONLY

Date: _____

Line of Credit Approved / Denied Amount \$ _____

Comments: