

CREDIT APPLICATION

NAME OF BUSINESS _____		DUN & BRAD # _____	
ADDRESS _____		ANNUAL SALES _____	
CITY/STATE/ZIP _____		TELEPHONE () _____	
BILLING ADDRESS (IF OTHER THAN ABOVE) _____		STATE _____	ZIP _____
DATE COMPANY ESTABLISHED _____		HOW LONG AT PRESENT ADDRESS? _____	
FEDERAL I.D. # _____		AMOUNT AND SOURCE OF CAPITAL _____	
NUMBER OF EMPLOYEES _____	ORGANIZATION (CHECK ONE) <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORP. <input type="checkbox"/> ASSOC.		
TYPE OF BUSINESS (PRODUCT SERVICE) _____		PURCHASE ORDER REQUIRED (CHECK ONE) <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAMES & TITLES OF PRINCIPALS			
1. _____			
2. _____			
3. _____			
NAMES/ADDRESSES/TELEPHONE NUMBERS OF BANKS (INCLUDE ACCOUNT NUMBERS)			
1. _____			
2. _____			
3. _____			
NAMES & TELEPHONE NUMBERS OF PERSONS AUTHORIZED TO CHARGE TO YOUR ACCOUNT			
1. _____			
2. _____			
3. _____			

SOLE OWNER / PROPRIETORSHIP		
NAME OF OWNER _____	SPOUSE'S NAME _____	
RESIDENCE _____	TELEPHONE () _____	
SOCIAL SECURITY NUMBER _____	DRIVER'S LICENSE NUMBER _____	
MAXIMUM CREDIT CARD ACCOUNTS (INCLUDE ACCOUNT NUMBERS)		
1. _____		
2. _____		

PARTNERSHIP (PLEASE LIST EACH PARTNER WHO HAS A LIMITED INTEREST IN THE BUSINESS)		
NAME _____	TELEPHONE () _____	
ADDRESS _____		
SOCIAL SECURITY NUMBER _____	DRIVER'S LICENSE NUMBER _____	
NAME _____		
ADDRESS _____	TELEPHONE () _____	
SOCIAL SECURITY NUMBER _____	DRIVER'S LICENSE NUMBER _____	