



CREDIT APPLICATION

Company Name _____
 Billing Address _____
 Shipping Address _____
 Telephone _____ Fax _____
 Business Description _____ Date Business Started _____
 Resale Tax No. _____ Annual Sales: _____

Contacts:

Equipment Buyer _____ Phone/Ext. _____
 Controller _____ Phone/Ext. _____
 Accounts Payable _____ Phone/Ext. _____

Trade References:

Vendor	Telephone No.	FAX No.
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Bank Reference:

Bank _____
 Telephone. _____ Fax _____

By _____ Title _____
 Signature _____
 Name (Printed) _____

For Accounting Use Only

Date account opened: _____ Credit checked by: _____
 Credit limit: _____ Customer No. _____
 Terms: _____ Approved by: _____