

CREDIT APPLICATION

Company Information

Date *

Company Name *

DUNS# *

Purchasing Contact *

Mailing Address *

City *

State *

Zip *

Phone *

Fax *

Check One: * Corporation Corp. Type Partnership

Taxable: Yes No

Federal Tax ID Number *

Please attach a copy of your sales tax exemption certificate, if applicable.

Ship To Address (if different) *

City *

State *

Zip *

Billing Address *

City *

State *

Zip *

A/P Contact *

A/P Phone *

A/P Fax *

A/P Email Address: *

Applicant Signature: Clear Signature

Credit References: (Please list 3 or attach credit resume)

Name *

Address *

City *

State *

Zip *

Phone *

Fax *

Name *

Address *

City *

State *

Zip *

Phone *

Fax *

Name *

Address *

City *

State *

Zip *

Phone *

Fax *

Bank Information:

Bank Name *

Account Number *

City *

State *

Zip *

Contact *

Phone *

Fax *

For Internal Use Only

Account Number

Salesman #

Terms

Matrix Code

Ship Via

D&B Paydex

FOB

Credit Limit

Approval

Rejection