



**APPLICATION  
FOR CREDIT  
COMMERCIAL ACCOUNT**

**NEW ACCOUNT INFORMATION**

COMPANY NAME \_\_\_\_\_

Street Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

BILLING ADDRESS (if different) \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

OFFICE TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

Bookkeeper or Accounts Payable Manager \_\_\_\_\_

Will Purchases Be Tax Exempt? Yes No If Yes, State Tax No. \_\_\_\_\_

**INFORMATION ABOUT YOUR FIRM**

YEAR ESTABLISHED \_\_\_\_\_ NO. OF EMPLOYEES \_\_\_\_\_

LINE OF BUSINESS \_\_\_\_\_

ENTITY: Sole Proprietorship Partnership Non-Profit Organization  
Corporation (*Year Incorporated* \_\_\_\_\_ *State Incorporated* \_\_\_\_\_ )

If company name changed within past 3 years, specify \_\_\_\_\_

If company currently uses another trade name, specify \_\_\_\_\_

If branch, give location of Headquarters \_\_\_\_\_

**INDIVIDUAL OWNER, PARTNERS OR OFFICERS**

1. NAME \_\_\_\_\_ TITLE \_\_\_\_\_

Home Address \_\_\_\_\_

2. NAME \_\_\_\_\_ TITLE \_\_\_\_\_

Home Address \_\_\_\_\_

3. NAME \_\_\_\_\_ TITLE \_\_\_\_\_

Home Address \_\_\_\_\_

4. OTHER \_\_\_\_\_

CONTINUED ON BACK

## BANKING REFERENCES

BANK NAME \_\_\_\_\_

Branch Address \_\_\_\_\_

Officer or Contact \_\_\_\_\_ Telephone (     ) \_\_\_\_\_

Type of Account \_\_\_\_\_ Account No. \_\_\_\_\_

Type of Account \_\_\_\_\_ Account No. \_\_\_\_\_

OTHER BANK OR INSTITUTION \_\_\_\_\_

\_\_\_\_\_

## CREDIT REFERENCES

1. COMPANY \_\_\_\_\_

Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Account No. \_\_\_\_\_

2. COMPANY \_\_\_\_\_

Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Account No. \_\_\_\_\_

3. COMPANY \_\_\_\_\_

Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Account No. \_\_\_\_\_

4. COMPANY \_\_\_\_\_

Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Account No. \_\_\_\_\_

Estimated Monthly Purchase from us: \$ \_\_\_\_\_

Other Information \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I hereby authorize you to obtain credit information on our firm:*

SIGNATURE \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Date Signed \_\_\_\_\_