

Your Business name/address, phone number here

## CREDIT APPLICATION

### 1. Company Information

|                                                                                                                                                                                                       |                           |                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------|
| Full Legal Name/Business Entity                                                                                                                                                                       | Phone #                   | Fax #                           |
| Doing Business as (DBA)                                                                                                                                                                               |                           |                                 |
| Billing Address                                                                                                                                                                                       | City                      | State Zip                       |
| Company Type:<br><input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Franchise <input type="checkbox"/> Corporation <input type="checkbox"/> Other: |                           |                                 |
| No. of Employees                                                                                                                                                                                      | Year Business Established | Annual Sales   Type of Business |
| Federal Tax ID                                                                                                                                                                                        | State of Incorporation    | DUNS NUMBER:                    |
| E-Mail Address(es):                                                                                                                                                                                   | Website:                  |                                 |

### 2. Owner Information

|                                      |       |                   |
|--------------------------------------|-------|-------------------|
| Full Name (including middle initial) | Title | Social Security # |
| Home Address                         | City  | State Zip Phone # |

### 3. Bank References

|             |                                                  |                   |
|-------------|--------------------------------------------------|-------------------|
| Bank Name   | Account Number                                   | Contact           |
| Address     | City                                             | State Zip Phone # |
| <b>Fax#</b> | Number of years doing business with this Company |                   |

### 4. Trade Credit References (Please provide at least three from Transportation Industry) *Please include fax number*

|              |                                                  |
|--------------|--------------------------------------------------|
| Company Name | Contact                                          |
| Address      | City   State   Zip   Phone #                     |
| <b>Fax#</b>  | Number of years doing business with this Company |

|              |                                                  |
|--------------|--------------------------------------------------|
| Company Name | Contact                                          |
| Address      | City   State   Zip   Phone #                     |
| <b>Fax#</b>  | Number of years doing business with this Company |

|              |                                                  |
|--------------|--------------------------------------------------|
| Company Name | Contact                                          |
| Address      | City   State   Zip   Phone #                     |
| <b>Fax#</b>  | Number of years doing business with this Company |

We hereby apply for credit and affirm financial responsibility, ability and willingness to pay invoices in accordance with published terms. The above information is warranted to be true and complete. We hereby authorize you to verify and collect information on us, including but not limited to bank references, trade credit references, consumer and/or commercial credit reports. We agree to pay all costs of collection and litigation on this account in accordance with the laws of the Creditor's State of Incorporation. We agree that all decisions with respect to the extension or continuation of credit shall be in the sole discretion of the Creditor.

I have read the terms and conditions stated below and agree to all of these terms and conditions.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name \_\_\_\_\_ Title: \_\_\_\_\_

**GENERAL TERMS AND CONDITIONS AND PERSONAL GUARANTEE**

1. Net 30 days.
2. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit dept.
3. **PERSONAL GUARANTEE:** If the credit customer is a corporation, LLP or LLC, then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased on credit by the entity.

We are requesting credit in the amount of \$ \_\_\_\_\_

**For fast credit approval, please email to:**

**Or fax to:**

**Your Business name here**

**Attn:**

**Fax:**