



CREDIT APPLICATION FORM

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Amount of Credit requested \_\_\_\_\_

Bank Information: Phone \_\_\_\_\_ Contact \_\_\_\_\_ Email \_\_\_\_\_

Trade References

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I/We hereby make application for a credit account and agree to make payment for goods and services supplied on such account in net 30 days, and further agree to pay interest at the rate of 2% per month on any amounts not paid in 30 days of date of invoice. I/We acknowledge that the goods and or services obtained on this account will be used in my/our business.

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

Title \_\_\_\_\_