

COMPANY INFORMATION				
Company Legal Name			Subsidiary or Division of	
Street Address		City	State	Zip
Country		Contact		Fax
Title		Phone		
Primary Business Description		Web Address		E-Mail
Date Established	Years Under Present Ownership	Type of Ownership:		
		Corporation	Partnership	Proprietorship-Individual
If Corporation, Federal ID#	P.O. Required?			
	Yes	No		

COMPANY OFFICERS & PRINCIPALS			
1. Name	Title	Social Security#	E-Mail
2. Name	Title	Social Security#	E-Mail
3. Name	Title	Social Security#	E-Mail
4. Name	Title	Social Security#	E-Mail

TRADE REFERENCES		
1. Name	Phone	Fax
Address		E-Mail
2. Name	Phone	Fax
Address		E-Mail
3. Name	Phone	Fax
Address		E-Mail
4. Name	Phone	Fax
Address		E-Mail

BANK REFERENCE		
Name	Contact Officer	Account #
Address		Phone
		Fax

The undersigned hereby certifies that the above information is true and correct and in addition to the foregoing the undersigned promises to pay for all purchases in accordance with your terms of sale. If at anytime the undersigned is unable to pay for said purchases when due, the undersigned agrees to pay and authorizes you to bill my account with interest computed at 1.5% per month (18% per annum) on any past due amount or the maximum prevailing rate allowable under the law of the state governing the transactions contemplated by this credit application. If it becomes necessary for your company to incur collection costs for any amount due under this agreement the undersigned promises to pay any additional collection costs including reasonable attorney fees.

Date	Print Name and Title	Owner or Officer Signature