

CREDIT APPLICATION

| Firm Name | | | | |
|---------------------------|----------------------------|---------------------|-------------|--|
| Street Address | | | | |
| City | State_ | Zip_ | Phone | |
| Type of Organization | Individual | Partnership | Corporation | |
| Year Incorporated | | State Incorporation | | |
| Names of owners, partners | or authorized officers | 3 | | |
| Home address | | | | |
| City | State | Zip | Phone | |
| Percent of ownership | | | | |
| Type of business | Estim | nated annual sales | | |
| Own or Rent | or Rent If rent, from whom | | | |
| | BA | NK REFERENCE | | |
| Bank Name | | | | |
| Street Address | | | | |
| City | State | Zip | Phone | |
| Account # | | | | |
| Type of Account | _ Checking | Savings | Loan | |
| Account # | | | | |
| Type of Account | _ Checking | Savings | Loan | |

Credit Application Continued....

TRADE REFERENCES

| Firm Name | | Phone | |
|----------------|-------|-------|--|
| Street Address | Fax | | |
| City | State | Zip | |
| Credit Line | Terms | | |
| Account # | | | |
| Firm Name | | Phone | |
| Street Address | | Fax | |
| City | State | Zip | |
| Credit Line | | Terms | |
| Account # | | | |
| Firm Name | | Phone | |
| Street Address | Fax | | |
| City | State | Zip | |
| Credit Line | Terms | | |
| Account # | | | |

Please fax or email this document to the attention of Wholesale Accounts