



CREDIT APPLICATION

CONFIDENTIAL INFORMATION

Company Name:	_____		
Address:	_____ _____ _____		
Telephone:			Fax:

Major Lines Handled:	_____		
Number of Salesman			Area Served:
Annual Volume:	_____		
Type of Organization:	Corporaton: <input type="checkbox"/>	Partnership: <input type="checkbox"/>	Owner: <input type="checkbox"/>
Officers; Partners, Key Personnel;			
	Name: _____		Title: _____
	Name: _____		Title: _____
	Name: _____		Title: _____
	Name: _____		Title: _____

<u>Bank Reference:</u>			
Name	_____		
Address:	_____ _____ _____		
Telephone:			Fax:

<u>Commercial Credit References</u>			
Name	_____		
Address	_____		
Telephone			Fax:
Name	_____		
Address	_____		
Telephone			Fax:
Name	_____		
Address	_____		
Telephone			Fax:

Title	Signature	Date
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