



Thank you for your interest in our products. Please complete the following to establish an account with us.

REQUEST FOR CREDIT

FROM: (Complete company name and address.)

Subsidiary Of: _____

Division Of: _____

Complete Address of Parent or Home Office:

Phone #: _____

Fax #: _____

Business Started (Year) _____

Rated by D & B Yes No

Bank Affiliation: (Complete name and address.)

Name: _____

Contact: _____

Address: _____

Phone: _____

Account #: _____

Line of Credit Requested: \$500 \$1,000 \$5,000 \$10,000 +

Can and will you adhere to our term of "Net 30 Days"? Yes No

List six (6) major suppliers (Please include account numbers.):

Name: _____ Contact: _____ Address: _____ _____ Phone: _____ Fax: _____ Account #: _____	Name: _____ Contact: _____ Address: _____ _____ Phone: _____ Fax: _____ Account #: _____
Name: _____ Contact: _____ Address: _____ _____ Phone: _____ Fax: _____ Account #: _____	Name: _____ Contact: _____ Address: _____ _____ Phone: _____ Fax: _____ Account #: _____
Name: _____ Contact: _____ Address: _____ _____ Phone: _____ Fax: _____ Account #: _____	Name: _____ Contact: _____ Address: _____ _____ Phone: _____ Fax: _____ Account #: _____

All Information Furnished Will Be Held In Strict Confidence!

Completed By (Name & Title): _____ Date: ____/____/____