



Thank you for applying for credit. We look forward to being your supplier. _____

CREDIT APPLICATION

Company Name: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Shipping Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ e-mail: _____

Accounts Payable Contact: _____ Phone: _____

Safety Director: _____ Phone: _____

Safety Buyer: _____ Phone: _____

Date Business Started: _____ Type of Business: _____

Tax Exempt #: _____ Copy of certificate required. _____

Trade Reference: _____ Acct # _____ Terms: _____

Address: _____ City _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Trade Reference: _____ Acct # _____ Terms: _____

Address: _____ City _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Trade Reference: _____ Acct # _____ Terms: _____

Address: _____ City _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Bank Reference: _____ Acct # _____ Contact: _____

Address: _____ City _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____