



APPLICATION FOR COMMERCIAL CREDIT

APPLICANT INFO	RMATION				
Requesting Credit Fo	or: Leasing & Rental	Sales	Service	Parts	
-			Federal ID	- - #	
				State	
	Fax	,			
	itle				
• •			How Long	in Business	
Individual Partnership	Social Security #	Spo C Preside	ouse's SS # (if inc	ss #	
Sales Tax Exempt	Yes No If yes	s, please submit l	Exemption Certif	icate with th	is application.
Any Lawsuits or Judo Filed Bankruptcy Tax Obligations Due	Yes	No How Did No No	d You Hear Ab	out Us	
BILLING INSTRUCT	TIONS				
P.O. Required?	Yes No If yes	s, who may issue	P.O. <u>?</u>		
Billing Address (if diff Address	erent from above)	City		State	Zip
INSURANCE					
Carrier		Agent		Phone	
BUSINESS REFEREN	ICES - BANK				
Name		Location			_
Account #			F	Phone	
Name		Location			_
Account #	Contact		F	Phone	





BUSINESS REFI	ERENCES - TRADE (Exclude	e fuel, te	lephone and tire vendors) I	List 5		
			Location/Account #			
		Phone	Location/Account #			
		Phone	Location/Account #			
		Phone	Location/Account #			
		Phone	Location/Account #			
	NT FINANCING	Annı	ıal Profit			
Year Lender	Owned or Being Purchase Make/Type		Balance \$ Account Number	Payments \$		
Year Lender	Make/Type					
Lender	Make/Type		Account Number			
Year Lender	Make/Type		Account Number	Payments \$		
Property Mortgo Property Addres	age or Lease	FIIOI	e			
	Monthly Payment \$_		Lender/Property Owne	>r		
about you	formed that the seller or any financing or your character, general reputation you so desire, the nature and scope o	n, personal	characteristics and mode of living.	If this report is obtained		
	nformation is and is given for					
Signature Date						