

MAXIMUM CREDIT LINE APPLICATION

Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
\* Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_ Corporation. If incorporated, please give State: \_\_\_\_\_ Year: \_\_\_\_\_  
Type of Products/Services sold: \_\_\_\_\_  
\*Federal Tax I.D. No \_\_\_\_\_ State Resale No. \_\_\_\_\_  
Date Company Established: \_\_\_\_\_ Amount of Credit Requested: \_\_\_\_\_  
Landlord: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Authorized Purchaser(s): \_\_\_\_\_

INFORMATION ON PRINCIPALS

\*Name: \_\_\_\_\_ \*Social Security No: \_\_\_\_\_  
\*Address: \_\_\_\_\_ \*Home Telephone No: \_\_\_\_\_  
\*City: \_\_\_\_\_ \*Drivers License No: \_\_\_\_\_  
\*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_ \*Own: \_\_\_\_\_ \*Rent: \_\_\_\_\_  
\*Cell Phone No \_\_\_\_\_ \*Pager No: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Telephone No: \_\_\_\_\_  
City: \_\_\_\_\_ Drivers License No: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Own: \_\_\_\_\_ Rent: \_\_\_\_\_  
Cell Phone No \_\_\_\_\_ Pager No: \_\_\_\_\_

BANK INFORMATION

Company	Principals
Name of Bank: _____	Name of Bank: _____
Account No.: _____	Account No.: _____
Branch Address: _____	Branch Address: _____
Telephone: _____	Telephone: _____

Name of Bank: _____	Name of Bank: _____
Account No.: _____	Account No.: _____
Branch Address: _____	Branch Address: _____
Telephone: _____	Telephone: _____

SUPPLIER INFORMATION (Current open Credit Lines)

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Account No.: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Account No.: \_\_\_\_\_