

BUSINESS CREDIT APPLICATION FORM

Business Legal Name: _____
Doing Business As (DBA): _____
Federal Tax ID (EIN): _____
Type of Business Entity: _____
(Corporation, LLC, Partnership, Sole Proprietorship, Other)

Business Contact Information:

Business Address: _____
City: _____ State: _____ ZIP Code: _____
Phone Number: _____
Fax Number: _____
Email Address: _____

Business Details:

Date Business Established: _____
Number of Employees: _____
Annual Gross Sales: _____
State of Incorporation/Formation: _____

Principal Owners / Officers:

Full Name: _____
Title: _____ Social Security Number: _____
Home Address: _____
Phone Number: _____

Trade References:

Reference #1 Company Name: _____
Contact Name: _____
Phone Number: _____
Account Number: _____
Reference #2 Company Name: _____
Contact Name: _____
Phone Number: _____
Account Number: _____
Reference #3 Company Name: _____
Contact Name: _____
Phone Number: _____
Account Number: _____

Banking Information:

Bank Name: _____
Bank Address: _____
Account Number: _____
Phone Number: _____

Applicant represents and warrants that the information provided herein is true and correct and authorizes the Bank and/or Lender to obtain credit reports and verify all information. Applicant agrees to pay all amounts due according to agreed terms, including any applicable interest and fees. Applicant agrees to comply with all applicable laws and regulations governing the use of credit. This application does not guarantee approval. The Bank/Lender reserves the right to approve or deny credit based on its own underwriting criteria.

Authorized Signature:

Applicant's Signature

Title

Date: _____

Phone Number:

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