

CREDIT APPLICATION

Bill Street: City, State, Zip:		Ship Street: City, State, Zip:		
		Fax:		
Ownership: [] Individual [Federal ID Number:] Partnership [] Corporation	[] Other Explain:		
NAME Years in business: P.O. Needed: [] Yes	years	DRESS Dun & Brad # (O	ptional):	CITY,STATE,ZIP
	SECTIO	N 2: BANK INFORMATION		
Bank name: Street:		Officers name: Account No.:		
City, State, Zip:		Account type:		
	SECTION	3: VENDOR INFORMATION	l	
Address.			Phone: Fax:	
			Phone: Fax:	
Name / Contact:			Phone:	
		4: CREDIT AND SIGNATUR		
	SECTION			
	hereby personall	Credit nsideration of Deal Internati y and jointly and severally gu ot limited to legal and collect	onal extending cre arantee payment o	of all debts incurred by
		Signature		
Title	Date	Home Address		
City	State	Phone # ()		
Witness Namo	V	Vitness Signature		

Please fill all sections and then mail or fax this form to the above address. Thank you.