

Service Warehouse

APPLICATION FOR CREDIT

LEGAL BUSINESS NAME _____

ADDRESS _____

CITY _____

ZIP CODE _____ PHONE # _____ FAX # _____

RESALE # _____

___ PROPRIETORSHIP ___ PARTNERSHIP ___ CORP. IN STATE OF _____

---TRADE REFERENCES---

TRADE 1) _____ PHONE _____
COMPANY NAME

FAX _____

TRADE 2) _____ PHONE _____
COMPANY NAME

FAX _____

TRADE 3) _____ PHONE _____
COMPANY NAME

FAX _____

BANK 1) _____
NAME ACCOUNT #

_____ PHONE _____
CONTACT

FAX _____

This signature authorizes the above stated bank and references to provide account balance, loan information, and other information, regarding the financial stability of the account.

SIGNATURE _____ TITLE _____

SW