

## CREDIT APPLICATION

<b>Client Data</b>		
Legal Corporate Name	:	
Trade Name	:	
Address	:	
	Tel : (    )	Fax : (    )
	Accounts Receivable E-mail :	
Principal Contact	:	Title :
Date Established	:	
Check One	:	<input type="checkbox"/> Head Office <input type="checkbox"/> Branch <input type="checkbox"/> Subsidiary <input type="checkbox"/> Sole Location
<i>If Branch or Subsidiary, please provide:</i>		
Name of Parent Co.	:	
	Tel : (    )	Fax : (    )
Parent Co. Office Address	:	
<b>Bank Data</b>		
Bank Name	:	Since :
Address	:	
	Tel : (    )	Fax : (    )
Account Number	:	Type Account :
Branch Number	:	Trasnsit Number :
Account Manager	:	Tel : (    )
<b>Trade References</b>		
1. Company Name	:	Contact :
Address	:	
	Tel : (    )	Fax : (    )
2. Company Name	:	Contact :
Address	:	
	Tel : (    )	Fax : (    )
3. Company Name	:	Contact :
Address	:	
	Tel : (    )	Fax : (    )

**LIMIT REQUESTED** : \_\_\_\_\_.

We acknowledge that a credit investigation will be conducted based on the information above and we authorize you to contact those references necessary to obtain the information required.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ Authorized Signature: \_\_\_\_\_

**BRANDFELT** use only:

Approval Date: \_\_\_\_\_ Approved Limit: \_\_\_\_\_