

50B Rocky Point Yaphank Rd. Rocky Point, NY 11778 (631)744-2887 CREDIT APPLICATION

Name of Business		INFOR	MATION	DESCRIPTION OF BUSINESS				
Business Structure	Name of Busin	ess		No. of employees	Credit	Requested	Type of Business	
Corporation artnership prietorship Division/Subsidiary Parent Company:	Address			In Business Since				
STATE ZIP Prent Company: Phone Fax Email Company Principals Responsible For Business Transactions Name Title Address Phone Name Title Address Phone Name Title Address Phone References Name Title Address Phone References Name to Contact References Name to Contact Branch Address Checking Account No. Phone#(Required) Fax or Email (Required) Trade References: (Unsecured Trade creditors only. Finance, and Fuel Companies are not acceptable) Firm Name Contact Name Telephone Number Fax or Email(Required) Liberatory that the information in this credit application is correct. The information included in this credit application is to be used to determine the amount and conditions of credit to be extended. Lunderstand that the other sources of credit considered necessary in making the determination may also be used. Further, I hereby authorize the bank and trade references listed in the above credit application release the information necessary to assist in establishing a list ensiblishing at least ensibles in the above credit considered necessary in making the determination may also be used. Further, I hereby authorize the bank and trade references listed in the above credit application to release the information or telease the information or credit to be extended. Lunderstand that the other sources of credit considered necessary in making the determination may also be used. Further, I hereby authorize the bank and trade references listed in the above credit application to release the information or credit on the sease say to assist in establishing at least ensible in the authorize the bank and trade references listed in the above credit considered necessary to assist in establishing at licentical procedures, and personally guarantees the payment of all bills incurred by the above mentioned company. Print Signed Title Date	City							
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