



## Credit Application

Business Name: \_\_\_\_\_

Federal ID: \_\_\_\_\_ Dun & Bradstreet # \_\_\_\_\_

IRS #: \_\_\_\_\_ FDA #: \_\_\_\_\_

### Billing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

Prov/State: \_\_\_\_\_

Postal Code/Zip: \_\_\_\_\_

Payables: \_\_\_\_\_

Email: \_\_\_\_\_

Tel: \_\_\_\_\_ Ext: \_\_\_\_\_

Fax: \_\_\_\_\_

### Shipping Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

Prov/State: \_\_\_\_\_

Postal Code/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Tel: \_\_\_\_\_ Ext: \_\_\_\_\_

Fax: \_\_\_\_\_

### Banking Information:

Bank Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov/State: \_\_\_\_\_ Postal code/Zip: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

### Trade References:

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

**We certify that all the information supplied on this form is correct. We fully understand your credit terms of Net 30 days and agree to the proper payment in consideration of extended credit.**

(Our credit application must be completed in order to have your account processed for credit and terms, you may attach your trade references but your business name and signature must appear on our form).

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_