



# CREDIT APPLICATION

## Customer Information

Company Name:			
Phone:		Email:	
Company Address:			
City:	State:	Zipcode:	
Date Business Began:			
Ownership Type:	Sole Proprietorship	Partnership	Corp.

## Company Financials

Annual Sales Amounts:	Top 5 Customers Sales Figures:	Please list the total dollar value of your top 5 customers by year	
Year To Date:	Year To Date:		

Current Liabilities On Books:	Current Accounts Receivable:
Current Liabilities:	Dollar Value:
Long Term Liabilities:	Amount Past Due:

*Please attach copy of company financial statements for verification*

## U.S. Based Trade References

Company Name:			
Phone:		Email:	
Company Address:			
City:	State:	Zipcode:	

Company Name:			
Phone:		Email:	
Company Address:			
City:	State:	Zipcode:	

Company Name:			
Phone:		Email:	
Company Address:			
City:	State:	Zipcode:	

## Standard Trade References

Company Name:			
Phone:		Email:	
Company Address:			
City:	State:	Zipcode:	

Company Name:			
Phone:		Email:	
Company Address:			
City:	State:	Zipcode:	