

## **Credit Application**

Please fill out this application completely. If not completed, it will be returned.

PLEASE TYPE OR PRINT

Business Name: Address:		Account Number: Telephone Number: Fax Number: Federal Tax Number: Date Business Started:	
Email Address: Purchasing Contact: Accounts Payable Contact:		_	
	Name of Owners, F	Partners or President	
Name		Title	
	List Three Credit/ 3	Frade References	
Name	Acct #	Telephone #	Fax #
		_	
		_	
		_	
Bank:	<u>Ba</u>	nk Information Branch:	
Address:		Telephone:	
in consideration for extended credit. Fu	urthermore, should it become r	e understand your credit terms and agree to necessary to collect unpaid balance by leg and court costs incurred by SBI in the collect	al process or
Signature:		Title:	
SBI's credit terms for open accounts are N balances are paid, at which time the acco	•	e may be placed on "stop shipment/credit ho us until good credit can be reestablished.	ld" status until all outstanding