P.O. Box 12063 Birmingham, AL 35202 888-322-4377 Phone 888-628-5678 Fax

Printed Name



BUSINESS CREDIT APPLICATION FOR NET 30 DAY TERMS

Please fill out and fax back to our Accounting Department 888-628-5678
Please allow 24-48 Hours for Approval. If you would like to be notified of approval please give your email address and you will receive an email within 24-48 hours.

	CUST	TOMER INFORMATION	
Company Name:		Your Name:	
Billing Address:		Shipping Address:	
City State:	Zip	City State:	Zip
Phone Number:		Fax Number:	
FE ID Number:		Business Type:	
SS Number:		Years in Business:	
Owner:		 ·	rtnership: her:
	ВА	NK REFERENCE	
Bank Name:		Contact Person:	
Account Number:		Phone Number:	
Company Name:		ADE REFERENCES han Credit Card Companies) Company Name:	
Address:		Address:	
	Zip	City State:	Zip
State:		Phone Number:	_ - -
State: Phone Number:	Lip	Phone Number: Fax Number:	
City State: Phone Number: Fax Number: Account Number:			

Signature

Title

Date