

**Credit Application**

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

Billing Address: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_\_) \_\_\_\_\_

Type of Business: \_\_\_\_\_ Federal I.D. #: \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_

**OWNER/OFFICER INFORMATION**

Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State, Zip \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State, Zip \_\_\_\_\_

**BANK REFERENCES**

1. Name \_\_\_\_\_ Contact \_\_\_\_\_  
City / State \_\_\_\_\_ Phone # \_\_\_\_\_  
2. Name \_\_\_\_\_ Contact \_\_\_\_\_  
City / State \_\_\_\_\_ Phone # \_\_\_\_\_

**TRADE AND SUPPLIER REFERENCES (Credit Accounts Only)**

Name	Address	City/State/Zip	Telephone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

Person to contact regarding account: \_\_\_\_\_

Are Purchase Orders Required? \_\_\_\_\_

Are you exempt from Florida Sales Tax? \_\_\_\_\_

If so, please furnish Exemption Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of person making application

\_\_\_\_\_  
Date