



CREDIT APPLICATION FOR NEW CUSTOMER

Date Amount of Initial Order Amount of Credit Requested

Contact Name Phone Number

Company Name

Date Business commenced Fax Number E-mail

Registered Company Address

City State Zip Code

Sole proprietorship Partnership Corporation Other

BUSINESS AND CREDIT INFORMATION

Primary Business Address

City State Zip Code

D&B Number

Phone Number Fax Number Tax ID Number

Bank Name Account Number Phone Number

Bank Address City State Zip Code

Accounts Payable Contact Name Phone Number

Email address

BUSINESS/TRADE REFERENCES

Company Name

Address

City State Zip Code

Contact Name E-mail Phone

Account #

Company Name

Address

City State Zip Code

Contact Name E-mail Phone

Account #

Company Name

Address

City State Zip Code

Contact Name E-mail Phone

Account #

AGREEMENT

By signing and submitting this application, you authorize Mobile Janitorial Supply to obtain bank information for credit purposes make inquiries to the business/trade references that you have supplied.

Signature Title Date