

# Credit Application



Company Name \_\_\_\_\_

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

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_ LLC \_\_\_\_\_

Date Started \_\_\_\_\_ Duns Number \_\_\_\_\_

Taxable? Yes \_\_\_\_\_ No \_\_\_\_\_ Resale # \_\_\_\_\_

(Copy Of Certificate Needs To Be Attached)

Is P.O. Required? \_\_\_\_\_ Accounts Payable Contact \_\_\_\_\_

Authorized Renters \_\_\_\_\_

## PRINCIPALS/OWNERS NAMES

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

## TRADE REFERENCES

Name \_\_\_\_\_ Phone \_\_\_\_\_ Acct # \_\_\_\_\_

Address \_\_\_\_\_ Contact \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Acct # \_\_\_\_\_

Address \_\_\_\_\_ Contact \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Acct # \_\_\_\_\_

Address \_\_\_\_\_ Contact \_\_\_\_\_

BANK INFORMATION

Primary Bank:		Second Bank:	
Bank Phone:		Bank Phone:	
Bank Fax:		Bank Fax:	
Checking Act:		Checking Account:	
Savings Acct:		Savings Account:	
Authorized User:		User #2:	

I certify the above information is correct and authorize its use for establishing credit with Access Media Group.

In consideration of the extension of rental terms, the undersigned severally and/or collectively personally guarantees the payment of all charges made by and/or on behalf of the applicants, any losses or damages, plus attorney fees, court, and all other costs of collection should collection proceedings become necessary.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_