

216 NORTH LOCUST AVE. GALLATIN, TN 37066 615.452.2900

CREDIT APPLICATION*

(Return Original to Concept One)

OFFICE USE ONLY				
Terms:				
Limit:	_			
Туре:				
Tax:	_			
Rep:				

COMPANY NAME			
BILLING ADDRESS			
STREET ADDRESS (If different)			
CITY		STAT	E ZIP
TELEPHONE ()	FAX ()	Email	
FEDERAL ID#	PLEASE CHECK ONE OF THE FOL	LOWING CORPORATION	□ PARTNERSHIP □ INDIVIDUAL □ LLC
OWNERS NAME OR CHIEF EXECUTIVE OFFI	CER		
AUTHORIZED PURCHASERS:			
AMOUNT OF CREDIT REQUESTED \$		YEARS IN BUSINESS	
A/P CONTACT		A/P EMAIL	
ENCLOSE A COPY OF STATE EXEMPTION LI	ETTER (NONTAXABLE STATUS CA	ANNOT BE ESTABLISHED WITH	OUT THIS DOCUMENT)
BANKING INFORMATION			
NAME		TELEPHON	E ()
ADDRESS			
ACCOUNT #	TYPE	_ ACCOUNT #	TYPE
TRADE REFERENCES			
NAME	ADDR	RESS	
TELEPHONE ()	FAX ()	CO	NTACT
NAME	ADDR	RESS	
TELEPHONE ()	FAX ()	co	NTACT
NAME	ADDR	RESS	
TELEPHONE ()	FAX ()	CO	NTACT
TERMS AND CONDITIONS THE APPLICANT AGREES TO PAY WITHIN MONTH (18% PER ANAHEIM) MAY BE ASSE			INVOICE. A SERVICE CHARGE OF 1.5% PER
			LLECT OR SECURE THIS DEBT, INCLUDING A WITH REFERENCE TO, SUIT OR OTHERWISE.
COMPANY NAMED HEREIN, THE UNDERSI	IGNED. ("GUARANTOR"), JOINS GUARANTEEING THE PERFORMA	IN THE EXECUTION OF THIS C NCE OF SAID COMPANY AND	APPLICATION AND EXTEND CREDIT TO THE CREDIT APPLICATION FOR THE PURPOSE OF TO THE TERMS AND CONDITIONS HEREIN
AND EXPRESSLY AUTHORIZE THAT CONC REPORTING AGENCY OR OTHER SOURCE PRINTING, INC. MAY MAKE SUCH FURTHE	EPT ONE SCREEN PRINTING, IN OF CREDIT INFORMATION. IN R OR ADDITIONAL INQUIRIES C PRINTING, INC. MAY PERFORM	C. MAY OBTAIN A WRITTEN O I ADDITION, YOU AGREE AND DR INVESTIGATIONS AS IT DEEN M SUBSFOUENT OR CONTINUI	EXTENSION OF CREDIT. YOU HEREBY AGREE R ORAL CREDIT REPORT FROM ANY CREDIT AUTHORIZE THAT CONCEPT ONE SCREEN AS APPROPRIATE OR NECESSARY TO MAKE A NG CREDIT EXAMINATION AS IT DEEMS APPLICANT'S CREDIT AT ANY TIME.
APPLICANT'S SIGNATURE/PERSONAL O	Guarantee		

APPLICANT'S TITLE ____