

WinPro Solutions, Inc. 17251 West 113th Street, Lenexa KS 66219

913-894-2130 www.winprosolutions.com

Credit Application

**Please PRINT or TYPE the requested information**

**Company Backgroud:**

Company Name: Phone: Fax:

Person to Contact: Position:

Email Invoices to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address:

 Street/PO Box City State Zip Code

Billing Address:

 Street/PO Box City State Zip Code

Date Established: Line of Credit Requested: $

Resale # Federal ID #

**Ownership:** ❒ Sole Owner ❒ Partnership ❒ Corporation

Principal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name) (Title) (SS#) (Home Address)

Principal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name) (Title) (SS#) (Home Address)

**Credit References:**

# Name Address/Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Bank Reference(s):** ❒ Checking ❒ Loan ❒ Savings

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_x\_\_\_\_\_ x

 (Name) (Address) (Acct. #) (Contact)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_x\_\_\_ x

 (Name) (Address) (Acct. #) (Contact)

Has the firm or any of its Principals ever been Bankrupt? Yes ❒ No ❒

If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Personal Guarantee

The information provided is for the purpose of obtaining an account and/or establishing credit with WinPro *solutions,*  Inc. I certify that all information provided is correct. By my signature, I am authorizing the release of credit information from the references listed above.

(Signature of Authorized Officer/Principal Title) (Date)

(Please Print Signed Name)

In consideration of selling goods to the above applicant on account or otherwise, by WinPro *solutions,* Inc., I hereby absolutely and unconditionally guarantee the credit, account, debt or obligation of the above named corporation. This is a continuing guarantee and shall continue so long as credit is extended or the account, debt or obligation is open. I expressly waive notice of default, diligence, resort to security, any obligation to proceed first against debtor or any other guarantor, and joiner of debtor or other guarantors. I further agree to pay all attorney’s fees, all costs and other expenses incurred in enforcement of the underlying obligation.

(Signature of Authorized Officer/Principal Title) (Date)

(Please Print Signed Name)

### CREDIT DEPARTMENT USE ONLY Date Line of Credit Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Date Line of Credit Denied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**