REDVANLY

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION			
Title		Date business commenced	
Company name		Sole proprietorship	
Phone | Fax		Partnership	
Contact Email		Corporation	
Registered company address City, State ZIP Code		Other	

BUSINESS AND CREDIT INFORMATION			
City, State ZIP Code		Bank name:	
How long at current address?		Primary business address City, State ZIP Code	
Phone		Phone	
Fax		Account number	
AP Email		Type of account	Savings Checking Other

BUSINESS/TRADE REFERENCES			
Reference 1			
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account	Savings Checking Other	Other	
Reference 2			
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account	Savings Checking Other	Other	
Reference 3			
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account	Savings Checking Other	Other	

REQUIRED DOCUMENTATION

Please attach a copy of your sales certificate (resale / sales-tax exemption certificate) to this application.
Applications received without a valid sales certificate cannot be processed.

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize REDVANLY PURSUITS LLC to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES			
Signature		Signature	
Name and Title		Name and Title	
Date		Date	