

H.G. Jenkins Construction

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Title		Date business commenced	
Company name		D Sole proprietorship	
Phone <input type="checkbox"/> Fax		D Partnership	
E-mail		D Corporation	
Registered company address City, State ZIP Code		0 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	
E-mail		Type of account	<input type="checkbox"/> Savings D <input type="checkbox"/> Checking D <input type="checkbox"/> Other

BUSINESS/TRADE REFERENCES

Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account	<input type="checkbox"/> Savings D <input type="checkbox"/> Checking D <input type="checkbox"/> Other	Other	

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 H.G. Jenkins Construction, Inc. 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	

**. AUTHORIZATION FOR
RELEASE OF CREDIT INFORMATION**

Date _____

To Whom It May Concern:

This letter will serve as authorization to release information to **H. G. Jenkins Construction** for the purpose of establishing a credit line with them.

The undersigned individual who is either a principle of the credit applicant or a sole proprietorship as credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

Name:
Address:
Social Security#:
Signature:

Name:
Address:
Social Security#:
Signature: