

PO BOX 8968  
Baltimore, MD 21222



410 388 0322  
fax 410 388 0805

## Credit Application

### **Company Information**

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### **Billing Address and information**

same as above \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### **Must list 3 trade references**

1. Company Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Company Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Company Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### **Bank Information**

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Ext \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Name \_\_\_\_\_ Type of Account \_\_\_\_\_ Account Number \_\_\_\_\_

### **Acceptance and Approval**

We are applying for credit or an extension of credit by your firm. The following information is being submitted as a basis for your consideration of our application. You are authorized to investigate this information pertaining to our credit and fiscal responsibility.

Should it be necessary to place this account for collection, I agree to pay all collection costs and attorney fees. I / We also agree that if part or no payments are made on the account within the terms specified that you have the right to assess and I / We agree to pay a "finance charge" computed by applying a periodic monthly rate of 1.5% to the past due balance. This is an annual percentage of 18%.

Signature \_\_\_\_\_ position occupied \_\_\_\_\_ Date \_\_\_\_\_