



CREDIT APPLICATION FORM

WETSTYLE AUTHORIZED DEALER

Name/Address

First name: _____ Middle: _____
Last name: _____ Title: _____
Name of business: _____
Tax ID#: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Fax: _____
Email: _____

Company Information

Type of Business: _____ In Business Since: _____
Legal Form Under Which Business Operates:
☐ Corporation ☐ Partnership ☐ Proprietorship
If Division/Subsidiary,
Name of Parent Company: _____ In Business Since: _____
Name of company's principal: _____
Title: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____

Bank References

Institution Name:	Institution Name:	Institution Name:	
Checking Account #:	Savings Account #:	Home Equity Loan:	Loan Balance:
Address:	Address:	Address:	
Phone:	Phone:	Phone:	

Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Fax:	Fax:	Fax:
Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

Accounting contact for price list update, modification or increase

Name: _____			
Address: _____			
City: _____	State: _____	ZIP: _____	
Phone: _____		Email: _____	

I hereby certify that the information contained herein is complete and accurate. This information has been submitted to WETSTYLE with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Signature / Title / Company

Date

**Thank you for sending us this information by fax at 450-536-0202.
 If you have any questions, please call us at 1 888 536-9001.**