

COMMERCIAL CREDIT APPLICATION

www.jjpowell.com cs@jjpowell.com

Date of Application

Name of Company		Business Phone ()
Street Address		Fax Number ()
City, State, Zip		Mobile Phone ()
Type of Business	Years in Business	County
Sales Tax Exempt #	Federal ID#	
Check One: Corporation Partr	nership Sole Proprie	etorship Individual
Government LLC	LLP	
Credit Amount Requested \$	Initial Order	·
Type of Purchase Control System: Pur	chase Order Only F	Phone Contracts Other
If other, please specific and list names of pe	rsons authorized:	
N	AMES OF OFFICERS/O	WNERS
Name	Title	% of Ownership
Address	City, State, Zip	
SSN#	_ Home Phone ()	
Former/Present Affiliated Companies:		
How Related		
Pending Litigation? If yes, give of	letails	
Ever filed bankruptcy? If yes, date a	nd state.	
Name	Title	% of Ownership
Address	City, State, Zip	<u>-</u>
SSN#		
Former/Present Affiliated Companies:		
How Related		
Pending Litigation? If yes, give of		

CREDIT AND TRADE REFERENCES			
Name	Address	Account No.	
Balance Due	Phone/Fax Numbe	er Contact Person	
Name	Address	Account No.	
Balance Due	Phone/Fax Numbe	Contact Person	
Name	Address	Account No.	
Balance Due	Phone/Fax Numbe	cr Contact Person	
Bank	Branch	Checking Acct No	
Contact Person	Phone	Loan No	
CLEARFIELD. NOTE: It is understood by sign to past due invoices each more	ning this application I am acknowledging	venue in any such action shall be in the county of g and accepting that a service charge will be added f 18.0%). Customer agrees to pay all costs of d without prior authorization of	
By signing this application, I a	· cknowledge that I have read and unders	stand the terms of sale and agree to abide by them.	
Signed:Full Company Name			
Ву:	Da	ite Signed:	
Title:			
OFFICE USE ONLY:			
Date Received	_		
Approved By Declined By	_		
ReasonAccount Code D/L #	_		
Credit Limit	_		
F/C Tax Col	_		

Ever filed bankruptcy? _____ If yes, date and state. _____