

# Application for Credit



## BILLING INFORMATION

Federal ID Number \_\_\_\_\_ Corporation \_\_\_ Partnership \_\_\_ Proprietorship

Tax Exempt?  YES  NO If yes, please attach copy of tax exempt form

Legal Business Name \_\_\_\_\_

Trade Name \_\_\_\_\_

Type of Business \_\_\_\_\_ Business Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

## GENERAL INFORMATION

Years in Business \_\_\_\_\_

Officers/Partners: Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

## BANK and TRADE REFERENCES

Bank Name \_\_\_\_\_

Account Number \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_

Company \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

I authorize the above named bank and trade references to release information on my accounts to Action Mailing Services, Inc. for the purpose of evaluating our creditworthiness. All information on this application is furnished on a confidential basis in support of this request to make commercial purchases on credit terms.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

*Credit Application AHR-F004, Version 1.04, Revised 04.20.10*