

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

# BUSINESS CONTACT INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Date business commenced |  |
| Company name |  | Sole proprietorship |  |
| Phone | Fax |  | Partnership |  |
| E-mail |  | Corporation |  |
| Registered company addressCity, State ZIP Code |  | Other |  |

# BUSINESS AND CREDIT INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| City, State ZIP Code |  | Bank name: |  |
| How long at current address? |  | Primary business addressCity, State ZIP Code |  |
| Phone |  | Phone |  |
| Fax |  | Account number |  |
| E-mail |  | Type of account | Savings  Checking  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 | Savings  Checking  Other | Other |  |

# agreement

1. All invoices are to be paid 30 days from the date of the invoice.
2. By submitting this application, you authorize Trans-Cal 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 |  |