



Credit Application

Please fill in all appropriate information. Complete and accurate information will speed the credit approval process. After completion, please fax to (516) 596-9467.

Applicant / Company Information

Company Name: _____	Telephone: _____
Legal Name: _____	Fax: _____
Address: _____	Alt. Phone: _____
City: _____ State: _____ Zip: _____	Mobile: _____

Nature of Business: _____

Owner (first, last): _____

Years in Business: _____

Contact Officer: _____ Title: _____

Person Signing Lease: _____ Title: _____

Sales Last Year \$: _____ Projected Next Year: _____

Current Equity: _____ Ind. Exp.: _____

Proprietorship Partnership Corporation Add Collateral

Describe Collateral: _____

Personal Information

Name: _____ Spouses Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Alt: _____ Mobile: _____

Applicant SS #: _____ Spouse SS\$: _____

W2 Last Year: _____ Spouse W2 Last Year: _____

Financial References Business / Personal

Company: _____ Account #: _____ Telephone: _____

Contact: _____ Since: _____

Company: _____ Account #: _____ Telephone: _____

Contact: _____ Since: _____

Company: _____ Account #: _____ Telephone: _____

Contact: _____ Since: _____

Trade References

Company: _____ Account #: _____ Telephone: _____

Contact: _____ Since: _____

Company: _____ Account #: _____ Telephone: _____

Contact: _____ Since: _____

Company: _____ Account #: _____ Telephone: _____

Contact: _____ Since: _____

Applicant Signature: _____ Date: _____

Print Name: _____