



P.O. Box 270068
 Oklahoma City, OK. 73137-0068
 FAX 405-787-4552 TOLL FREE 888-495-6983

Commercial Account Credit Application

Line of Credit Requested \$ _____ Present Balance \$ _____ (Date) _____

Business Name _____ Phone (____) _____

Address _____ For the past _____ years.
(Street) (City) (State) (Zip Code)

Shipping address _____
(Street) (City) (State) (Zip Code)

D/B/A _____ Federal Tax I.D. # _____

Former Business Address (if applicable) _____

Type of Business _____ How Long In Business? _____

Does State, County or City require a License? ___ Yes ___ No If Yes, License # _____

OWNERSHIP: ___ Sole Owner ___ Partnership ___ Corporation

PRINCIPAL:

(Name) (SSN#) (Home Address)

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(Name) (SSN#) (Home Address)

TRADE REFERNECES: (Name suppliers of major products and services)

NAME	ADDRESS/PHONE
_____	_____
_____	_____
_____	_____

BANK REFERENCES: ___ Checking ___ Loan ___ Savings

(Name) (Address) (Acct.#) (Contact)

(Name) (Address) (Acct.#) (Contact)

(Name) (Address) (Acct.#) (Contact)

of Employees _____ Est. Annual Sales \$ _____ Sales Area _____

Has the firm or any of its Principals ever been bankrupt? ___ Yes ___ No

If Yes, Explain: _____

Mortgage Holder/Landlord _____

Address _____ Phone _____



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OTHER BUSINESS DEBTS:

Name	Address	Balance Due
_____	_____	_____
_____	_____	_____
_____	_____	_____

Person to Contact About Account: _____
(Name) (Title)

The undersigned will/will not submit a financial statement. Any misrepresentation in this application will be considered evidence of a fraud, since thus information is the basis for the granting of credit.

As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed.

_____	(Name)	(Title)	_____	(Name)	(Title)
_____	(Name)	(Title)	_____	(Name)	(Title)

_____	(Print Name)	_____	(Signature)
_____	(SSN#)	_____	(Home Address)

CREDIT DEPARTMENT USE ONLY

Date Line of Credit Approved	_____	*** WEBSITE ****
Date Line of Credit Denied	_____	

COMMENTS: _____