

122 East 42nd Street, New York NY 10168 Telephone (212) 924-0900 Fax (212) 463-7734 Email- credit@kurtadler.com

Authorized Signature

Credit Application Form

Date		
Date		

To obtain credit from creditor, customer agrees to creditor's usual terms and conditions as promulgated and amended by creditor from time to time, and represents and states the following, and authorizes release of any information pertaining to customer's financial condition from any third parties, which may verify same:

CUSTOMER:	Telephone:
(Business Name)	
Street Address:	Fax:
City/State/Zip	Duns #
City/State/Zip Resale Tax# Website: Pusings Trade Name(s):	Email Address:
Business Trade Name(s):	
Branch Locations:	
Customer is a (check where appropriate):	
Sole Owner (Owners Name)	
Home Address:	Home Phone:
City/State/Zip:	Social Security #
☐ Partnership (Partner's Name)	
Home Address:	Home Phone:
City/State/Zip:	Social Security #
(Partner's Name)	
Home Address:	Home Phone:
City/State/Zip:	Social Security #
(Additional Partners - attach list)	
☐ Corporation (Corporate Name)	
Address:	Telephone:
	C4-4 F I 12 13 1114
Officers: (Pres.)	(Vice Pres.)
Address:	Address:
CITV/State/ZiD:	City/State/Zip
LLC (Limited Liability Co. Name)	
Address:	Telephone:
	State of Charter: Federal ID#
Manager:	
Address:	City/State/Zip
Business Started:	
Nature of Business	
(Examples: gift shop, garden c	center, Christmas shop, pool center, etc.)
Principal BankName	
	Contact Phone /Fax

Title

Date