

## **APPLICATION FOR CREDIT**

Company Name:			
Billing Address:			
Shipping Address:			
		Email:	
Contact Person:		Title:	
Individual, Corporation	ո, Sole Proprietorship ն	or Partnership:	
Years in Business:	Nature of Bu	siness:	
Fed Tax Identification	#:		
Attached Resale Certi	ficate: Yes I	No	
Name	NAMES OF OWNER		
		Title:	
		Title:	
Name:		Title:	
Name:		Title:	
	BANK REF	ERENCES	
Bank Name:			
Address:			
Phone #:	Fax #:		
Contact Person:		Title:	
Account #:			

## **BUSINESS / TRADE REFERENCES**

All four references must be completed to receive proper evaluation.

(1)	Name:			
	Address:			
	Contact Person:			
	Phone #:	Fax #:		
(2)	Name:			
	Address:			
	Contact Person:			
	Phone #:	Fax #:		
(3)	Name:			
	Address:			
	Contact Person:			
	Phone #:	Fax #:		
(4)	Name:			
	Address:			
	Contact Person:			
	Phone #:			
AGREEMENT				
* Finan * By su busine * You v	voices are to be paid 30 days from the date of invoice. Ice charges of 1.5% per month will be assessed on any pa Ibmitting this application, you authorize K & H Constructionss / trade references that you have supplied. It will be liable for any reasonable collection fees should collegning this application you agree to our terms and conditions.	on, LLC to make inquiries into the banking and lection action be necessary.		
Signature:		Date:		
Printe	ed Name:	Title:		
Perso	onal Guarantee Signature:			