

Credit Application/Agreement

ABC INC.

123 Street: City: Zip 12345
 Toll Free: (800) 123-XXXX (USA)
 Fax: (123) 345-XXXX

Legal Business Name:		Date Established:	
Operating As:			
Phone No:	Fax No:	Email: _____@_____	
Physical Address:			
City:	State:	ZIP:	Website: http://

Type of Business: <input type="checkbox"/> Corporation <input type="checkbox"/> State-Incorporated <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor			
Federal ID Number:		Number of Employees:	
Style of Business: <input type="checkbox"/> MFG. <input type="checkbox"/> Distributor. <input type="checkbox"/> Reseller <input type="checkbox"/> End User. <input type="checkbox"/> Service			
A/P Contact:	Phone No:	Email: _____@_____	
Annual Sales:		Anticipated Dollar Purchase per Month:	
Signing Officer(s):			
Yr this business Established:	D&B No.(DUNS No.):	Fiscal Yr End:	

Brands/Products Carried:	
Markets: <input type="checkbox"/> Local <input type="checkbox"/> National <input type="checkbox"/> International	Financial Statements: <input type="checkbox"/> Enclosed <input type="checkbox"/> Not Enclosed

Officer(s)/Owner(s)		
1.Name	Social Security No	Home Phone
2.Name	Social Security No	Home Phone

Parent Co. Name:		
Does Parent Company Guarantee Debts?: <input type="checkbox"/> Yes <input type="checkbox"/> No		
(if Yes, please give details):		
Parent Co Address:		
City	State	ZIP

1.Bank Name:		Phone Number	
Address:		Fax Number	
City:	State:	Zip:	
Account Officer:	Checking Account No.	Savings Account No.	
Loan Number:			
2.Bank Name		Phone Number	
Address		Fax Number	
City	State	Zip	
Account Officer			
Checking Account No.		Savings Account No.	
Loan Number			

Trade References: (Please give at least one from our industry)			
1.Company Name		Phone Number	
Address		Fax Number	
City	State	Zip	Account No.
Number of years done business with this company:			
2.Company Name		Phone Number	
Address		Fax Number	
City	State	Zip	Account No.
Number of years done business with this company:			

3. Company Name			Phone Number
Address			Fax Number
City	State	Zip	Account No.
Number of years done business with this company:			

By signing this credit application/agreement, the individual executing this Application below on behalf of Buyer, individually and personally, represents and warrants to ABC Inc that:

1) he/she is authorized to execute this Application on behalf of Buyer; 2) the information set forth in this Application is accurate and complete; 3) Buyer agrees that the prevailing party in any proceeding to enforce this Guarantee or to resolve a dispute with ABC Inc will be entitled to recover its costs, including attorneys' fees, collection agency fee, from the other party; and 4) any legal action brought by Buyer will be in the jurisdiction of [_____], and Buyer hereby submits to the jurisdiction of said courts. The laws of the State of ___ will apply. Buyer agrees to pay interest on any unpaid purchases, beginning 30 days after the payment due date, at the rate of 1.5% per month; 18% per annum, or the maximum judicial rate, whichever is less. Buyer also agrees to pay \$XX for each check issued by Buyer to ABC, INC which is returned to ABC, INC unpaid or marked NSF.

In signing this Application, Buyer agrees to all of the above and hereby grants permission for credit information to be verified by company(ies) and financial institution(s) that the Buyer has specified on this document and others that ABC, Inc becomes aware of during the credit review process and from time to time. The undersigned also understands that ABC, INC will retain this Application, whether or not it is approved, and that ABC, INC will consider this Application as a continuing statement of the undersigned's financial position and situation until notified otherwise by the Buyer.

In order for ABC, INC. to sell and to continue to sell to Buyer, Buyer hereby represents and warrants that it is solvent and that it pays its obligations as they become due. The preceding representation and warranty will be deemed to be repeated in each purchase by Buyer.

Faxed documents will be deemed as original. No oral agreements will be accepted. The terms on this credit application/agreement overrides all others,

Company Name: _____

Authorized Signature: _____ Date: _____

Signatory Name (pls. print): _____ Title: _____

PERSONAL GUARANTEE The individual by signing this credit application/agreement is executing this Application on behalf of Buyer and personally guarantees, and agrees to be personally liable for failure of the performance by Buyer of, any and all of Buyers' obligations under this Application with ABC, INC, including timely payment of any and all sums due to ABC, INC. The personal guarantee also applies in the event that the Buyer declares Bankruptcy or applies for Bankruptcy protection.

Signature: _____ Date _____

Guarantor's Name (pls. print): _____ Title: _____

This application must be completed in full in order to be processed.

Please Email the document back to: xyz@abcinc.com

OR Fax it to 1-800-xxx-yyyy

OR Call back Mr. _____ at 1-800-yyy-xxxx

OR Mail it to the Attn: Ms. _____; ABC INC, ____

Please PRINT

For ABC Inc Use ONLY

Terms Applying for: <input type="checkbox"/> COD <input type="checkbox"/> NET 7 <input type="checkbox"/> NET 30 <input type="checkbox"/> Other	Term Approved:
Credit Amt Requested: _____	Credit Amt Approved: _____
Applicant: <input type="checkbox"/> New <input type="checkbox"/> Existing- being renewed. <input type="checkbox"/> Existing- requesting increase in Cr. Limit	Sales Rep.:

<http://www.creditguru.com>

The above Credit Application/Agreement is only a Sample and is provided by CreditGuru.com for educational purpose only. We do not take responsibility for its accuracy, commercial use and viability. In order to come-up with your company's Credit Application/Agreement it is recommended that you take legal help.