



APPLICATION FOR CREDIT

please fax back to 401-383-3493 attn: Carol

Legal Company Name: _____

d/b/a (if applicable): _____

Address: _____

Telephone/ fax/ email: _____ / _____ / _____

Date of Incorporation/ State Incorporated: _____ / _____

Officers: _____

Federal ID #: _____

BANK REFERENCES:

Bank Name/ Department: _____

Address: _____

Account #: _____

Contact person(s): _____

Telephone/ fax/ email: _____ / _____ / _____

TRADE REFERENCES:

- Company Name: _____

Relationship (Supplier, customer, other): _____ Years? _____

Address: _____

Contact person(s): _____

Phone/ fax/ email: _____ / _____ / _____

- Company Name: _____

Relationship (Supplier, customer, other): _____ Years? _____

Address: _____

Contact person(s): _____

Phone/ fax/ email: _____ / _____ / _____

- Company Name: _____

Relationship (Supplier, customer, other): _____ Years? _____

Address: _____

Contact person(s): _____

Phone/ fax/ email: _____ / _____ / _____