

## **CREDIT APPLICATION:**

COMPANY NAME:	CORPORATE STRUCTURE:
AP CONTACT PERSON:	CORPORATION
PHONE NUMBER:	PARTNERSHIP
FAX NUMBER:	SOLE PROPRIETOR
EMAIL ADDRESS FOR INVOICES:	OTHER:
WEB SITE:	
BILLING ADDRESS:	
SHIPPING ADDRESS:	<del></del>
<del></del>	
	TAXABLE: YES NO
	IF NO, PLEASE ATTACH
TYPE OF BUSINESS:	EXEMPTION CERTIFICATE
BANK REFERENCE:	
A 000 UNITS	
PHONE:	
TRADE REFERENCE(S):	
COMPANY NAME/ADRESS:	
FRAAII.	
FAX:	
COMPANY NAME/ADRESS:	
EMAIL:	
FAX:	
COMPANY NAME/ADRESS:	
EMAIL:	
FAX:	

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