



CREDIT APPLICATION

Applicant Information			
Company Name:			
DBA (if different):			
Current Address:			
City:	State:	ZIP:	
Phone:		Fax:	
Federal Tax ID or Social Security Number:			
Type of Business	Number of Employees:		
Contact Person:	Date Business Established:		
Corporation			
Corporation: Yes No (please circle)		State of Incorporation:	
Name, Title, and address of your three chief corporation officers:			
1.			
2.			
3.			
Resident Agent Name:			
Address:			
City:	State:	Zip:	
Partnership			
Partner Name:			
Current Address:			
City:	State:	Zip:	
Partner Name:			
Current Address:			
City:	State:	Zip:	
Sole Proprietorship			
Sole Proprietor: Yes No (please circle)			
Trade References			
Reference #1 Name:			
Address:			
City:	State:	Zip:	
Phone:		Fax:	
Reference #2 Name:			
Address:			
City:	State:	Zip:	
Phone:		Fax:	
Reference #3 Name:			
Address:			
City:	State:	Zip:	
Phone:		Fax:	

ADVANCED LABELWORX
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