SMALL BUSINESS CREDIT APPLICATION FORM

Application Date:

	Company	Information	
Compan	y Name		
Fede	ral ID #	Cor	трапу Туре
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Street Address	City	State	Zip Code
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Phone Number	Emai	l Address	Fax Number
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Accounts Payable Conta	act Emai	l Address	Fax

Bank Information		
Bank Name	Address	Account Type

Business References (List at least 3)		
Company Name	Address	Contact

Owner Information			
First Name	Last Name	Phone Number	Email Address

The undersigned applicant, hereinafter referred to as the "Applicant", agrees to the following terms and conditions:

The approval of the credit request is at the sole discretion of the Creditor, subject to satisfactory credit evaluation.

The Applicant agrees to abide by the payment terms and conditions as set forth by the Creditor. Payment terms may include interest, fees, and a payment schedule to be outlined in a separate credit agreement or invoice.

If the Applicant is a business entity, the undersigned owner(s) personally guarantee the payment and performance of all obligations and liabilities incurred by the business.

The Applicant acknowledges that the Creditor may report payment history and credit-related information to credit reporting agencies.

The Creditor agrees to keep the Applicant's financial and business information confidential and use it solely for the purpose of evaluating and extending credit.

This agreement constitutes the entire understanding between the parties and supersedes all prior agreements, whether written or oral.

By signing below, the Applicant acknowledges having read and understood the terms and conditions outlined in this Small Business Credit Application Agreement and agrees to be bound by them.

Signature:	Signature Date: