

# Application For Credit

**Complete and Fax To: (877)433-3141  
Allow 10 business days for processing.**

Company: \_\_\_\_\_

Bill To: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Payable Contact: \_\_\_\_\_

Email: \_\_\_\_\_

- Check One:     Corporation  
                    Partnership Sole Proprietor  
                    Sole Proprietor

## Trade References

**A**  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Account # \_\_\_\_\_

**A**  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Account # \_\_\_\_\_

**A**  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Account # \_\_\_\_\_

**A**  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Account # \_\_\_\_\_

**Principal Business Bank**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Account # \_\_\_\_\_  
 Contact: \_\_\_\_\_

**Office Use Only**

<b>A</b>	<b>O</b>	<b>R</b>	<b>T</b>	<b>P</b>
<b>A</b>	<b>O</b>	<b>R</b>	<b>T</b>	<b>P</b>
<b>A</b>	<b>O</b>	<b>R</b>	<b>T</b>	<b>P</b>
<b>A</b>	<b>O</b>	<b>R</b>	<b>T</b>	<b>P</b>

This information is warranted to be true and is given for the purpose of obtaining credit from Ultramitre, Inc.. I/We agree to pay all bills per agreed terms. Should legal action be instituted to enforce payment of any outstanding balance I/We agree to pay all costs of suit and attorney's fees. This application and agreement, and all transactions pursuant hereto, are and shall be governed by the Internal Laws of the State of California.

Signature \_\_\_\_\_ Print \_\_\_\_\_

Title \_\_\_\_\_  
 (Corporate Officer or Owner Only)

