Business Credit Application

Contact Information

Full Name:	Title:	
Business Name:	% Ownership in Business:	
Tax ID:	SSN (optional):	
Street Address:	City:	State:
Email Address:	Zip Code:	Phone:

Business Information

Type of Business:		Years in Operation:	Legal Entity Type:
State of Registry:	Name of Responsible Party:		 Proprietorship Partnership Limited Liability Corp Corporation
Business Registry No.:	Street Address:		Other (Describe below)
	City:	State:	
	Zip Code:	Phone:	

Bank References

Bank Name:	Bank Name:	Bank Name:
Checking Account No.:	Savings Account No.:	Credit/Loan Account No.:
Contact Phone:	Contact Phone:	Contact Phone:

Trade References

Business Name:	Business Name:	Business Name:
Contact Name:	Contact Name:	Contact Name:
Business Street Address:	Business Street Address:	Business Street Address:
Contact Phone:	Contact Phone:	Contact Phone:
Account Age (Years):	Account Age (Years):	Account Age (Years):
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

Financial Information

Amount of Credit Requested:	Annual Net Income:	Total Business Assets:	Total Business Liabilities:
Have any officers filed a bankruptcy petition?		Is your company subject to any litigation? ☐ Yes ☐ No (If yes, please explain on a separate page.)	

Terms & Authorization

[Replace this text with the terms of your credit program and/or a link to the terms on your website. Include payment expectations & due dates, interest & fees, penalties for noncompliance, and any additional forms required (Articles of Organization, etc.). Note that when using templates, always have an attorney and CPA review it as well as ask to define the terms for your contract, including protection in the event of default.]

□ By signing this form, I consent to a credit report request by the creditor. I understand this may have a slightly negative, temporary impact on my credit score.

Applicant's Full Name:	Applicant's Signature:	Date: