

Confidential Credit Application

Company Information

Company Name: _____ Business No. _____

Address: _____ IRS No. _____

City: _____ State/Province: _____ ZIP/Postal: _____

Phone: _____ Email: _____

Name of Owner(s): _____ No. of Years in Business: _____

A/P Contact: _____ Type of Business: _____ Email: _____

Credit Limit Requested: _____

Bank Reference

Bank Name: _____ Account Manager: _____

Bank Address: _____ Email: _____

Institution Number: _____ Transit No: _____

Account No: _____ Phone No: _____

Trade References

Company: _____	Company: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Contact Name: _____	Contact Name: _____
Company: _____	Company: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Contact Name: _____	Contact Name: _____

I am the authorized representative of the applicant named herein and hereby bind the applicant to payment as per the invoice terms. The applicant hereby agrees to pay a 2% service charge per month on all overdue accounts.

I am the authorized representative of the applicant herein and hereby authorize RK Doors Inc. to obtain from any credit or consumer reporting agency or credit grantor information concerning the applicant and hereby waive on behalf of the applicant all rights of action for any consequences resulting from such information.

Name: _____ Signature: _____ Date: _____

For Office Use Only

Customer: _____ Credit Limit: _____ Terms: _____

Credit Reports: _____

Credit Approved: Yes () / No () Reason: _____ Signature: _____