

CREDIT APPLICATION

220 Montgomery Dr,
Canfield, OH 44406
Phone: 330-726-8045
Fax: 330-726-8045

Firm Name		DBA		Date	
Address			City	State	Zip
Mailing Address (If Different Than Above)			Parent Company (If Subsidiary)		
Owner Name			Accounts Payable Contact		
Business Phone		Business Fax			

BUSINESS STRUCTURE

Type OF Business			Kind of Business	Duns Number	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corp					
Year Established	Time at Present Location		Ever Filed Bankruptcy?		Ever Made Debt Settlement?
			<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Year of Inc.	State of Inc.	# of Employees	Annual Sales	Resale Tax#	Fed Tax ID#

TRADE REFERENCES

Company	City	State	Tel #	Fax#
1.				
2.				
3.				

BANK REFERENCES

Company	City	State	Tel #	Fax#
Account Type:		Account #:		

I fully understand that any line of credit extended is based on the above information which is best of my knowledge, is true and correct. I hereby authorize Wholesale Computer Products, inc to verify and inquire on all information submitted herein. I promise to pay for all purchases in accordance with terms and conditions stated. If at any time, for any reason, I am unable to pay "when due" and if any action is brought to enforce collection, the laws of the state of Ohio shall govern and "Wholesale Computer Products, Inc shall be entitled to recover all cost of collection, including but not limited to, interest at the rate of twenty-four percent (24%) per annum from the day of default, court costs and suit fees, including attorney's fees. I agree to pay such costs and fees.

Signed:	Print:	Title:	Date:
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