



# Credit Application

## COMPANY PROFILE

Company Name \_\_\_\_\_ Doing Business As: \_\_\_\_\_

Billing Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Person of Contact \_\_\_\_\_

Shipping Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Person of Contact \_\_\_\_\_

Ownership: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Owner \_\_\_\_\_ Federal Tax I.D. \_\_\_\_\_

Type of Business \_\_\_\_\_ Date Firm Established \_\_\_\_\_ No. of Employees \_\_\_\_\_

Credit Line Desired \_\_\_\_\_ Dun & Bradstreet Listed? \_\_\_\_\_ YES \_\_\_\_\_ NO Dun & Bradstreet No. \_\_\_\_\_

FED ACCOUNT # \_\_\_\_\_ UPS ACCOUNT # \_\_\_\_\_

## IF SUBSIDIARY/DIVISION

Name of Parent Company \_\_\_\_\_ Does parent guarantee debts? \_\_\_\_\_ YES \_\_\_\_\_ NO

Corporate Address \_\_\_\_\_  
(Street) (City) (State) (Zip code)

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

## NAMES OF PRINCIPALS OF FIRM

\_\_\_\_\_  
Name Title Home Address ( ) Home Phone Soc. Sec. No.

\_\_\_\_\_  
Name Title Home Address ( ) Home Phone Soc. Sec. No.

\_\_\_\_\_  
Name Title Home Address ( ) Home Phone Soc. Sec. No.

**BANK REFERENCES**

Checking: Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Branch \_\_\_\_\_ Address \_\_\_\_\_ Account No. \_\_\_\_\_

Asset Pledged? \_\_\_\_\_ Yes \_\_\_\_\_ No With Whom? \_\_\_\_\_

Savings: Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Branch \_\_\_\_\_ Address \_\_\_\_\_ Account No. \_\_\_\_\_

Asset Pledged? \_\_\_\_\_ Yes \_\_\_\_\_ No With Whom? \_\_\_\_\_

Loan: Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Branch \_\_\_\_\_ Address \_\_\_\_\_ Account No. \_\_\_\_\_

Asset Pledged? \_\_\_\_\_ Yes \_\_\_\_\_ No With Whom? \_\_\_\_\_

**TRADE REFERENCES**

(1) Co. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Contact \_\_\_\_\_ Address \_\_\_\_\_ Account No. \_\_\_\_\_

(2) Co. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Contact \_\_\_\_\_ Address \_\_\_\_\_ Account No. \_\_\_\_\_

(3) Co. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Contact \_\_\_\_\_ Address \_\_\_\_\_ Account No. \_\_\_\_\_

By affixing their signatures below, the undersigned (of if a corporation, the corporate authorized officers/agents) agree 1.) that the information contained herewith is warranted to be true and correct, 2.) to pay when due, all invoices from CubeKing 3.) that in the event of default of payment when due all costs of collection, including attorney’s fees and court costs, shall be paid by the Applicant, 4.) to authorize CubeKing to investigate any references herein listed or statement or any other data obtained from any person pertaining to the credit worthiness or financial responsibility of the applicant. By signing this document personal guarantee is part of this agreement.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**CubeKing**