



APPLICATION FOR CREDIT

Name _____

Billing Address _____ Telephone No. _____

City State, Zip Code _____ Fax No. _____

Form of Charge

Personal Business

Type of Business _____

Accounts Payable Contact _____

Bank Reference

Name of Bank _____

Address _____ Phone No. _____

Tax Information - Complete if applicable

Do you pay PA Sales Tax? Yes No

If exempt, reason for exemption _____

Exemption # _____

(Exemption slip must accompany credit application)

Credit Reference

Name _____ Phone No. _____

Complete Address _____

Name _____ Phone No. _____

Complete Address _____

Name _____ Phone No. _____

Complete Address _____

Persons Authorized to Use the Account

1. _____ 5. _____

2. _____ 6. _____

3. _____ 7. _____

4. _____ 8. _____

Purchase Orders / Job Names Yes - Required for all purchases
Reference Information Optional

Invest in Your Community Shop at Ferrier's