

**UNITED FASTENER, INC**  
**BUSINESS CREDIT APPLICATION**

**DATE:** \_\_\_\_\_

**NAME/ADDRESS**

Last:	First:	Middle Initial:	Title
Name of Business:			Tax I.D. Number:
Street Address:			
City:	State:	zip:	Phone:
Email:			Fax:

**BUSINESS INFORMATION**

Type of Business:	In business since:
Sole proprietorship: <input type="checkbox"/>	Partnership: <input type="checkbox"/>
Corporation: <input type="checkbox"/>	Other: <input type="checkbox"/>
Contractor's License Number (if applicable):	Resale Number (If applicable):

**BANKING INFORMATION**

Bank Name:	Bank Phone Number:
Bank Street Address:	
City:	State: zip:
Checking Account Number:	Savings Account Number:

**TRADE REFERENCES**

Company Name:	Contact Name:
Company street address:	
City:	State: zip: Phone:
Email:	Fax:
Company Name:	Contact Name:
Company street address:	
City:	State: zip: Phone:
Email:	Fax:
Company Name:	Contact Name:
Company street address:	
City:	State: zip: Phone:
Email:	Fax:

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date: