

CREDIT APPLICATION

Name of Account

Date

Address

Business Phone

City, State Zip

Fax Number

Type of Business

Year Business Established

Corporation -
State of _____

Sole Proprietorship

Partnership

Federal ID # _____

Name & Address of Officers or Owners

Bank Reference

Bank - Branch & ADDRESS

Account Number

Bank Contact Person

FAX

Telephone

Trade References: Please give 3 local trade references (excluding utilities) Please include **FAX** & phone numbers.

Name, Address, **FAX**

Name, Address, **FAX**

Name, Address, **FAX**

If Knorr Systems, Inc. approves our credit application, I guarantee to meet our obligations to pay within the terms of the sale. If our payment is not received within the terms of the sale, I agree to pay all late penalties and charges incurred. Further, I agree to pay any additional expenses Knorr Systems, Inc. may incur in collecting on our account, including, but not limited to attorney's fees.

I hereby authorize release of credit information to Knorr Systems, Inc.

Date

Signature and Title