

# Credit Application

## Company Information

Company Name <input style="width: 95%;" type="text"/>	Telephone <input style="width: 95%;" type="text"/>
Address <input style="width: 95%; height: 40px;" type="text"/>	Alt. Tel <input style="width: 95%;" type="text"/>
State Sales Tax Permit Number: <input style="width: 95%;" type="text"/>	Fax <input style="width: 95%;" type="text"/>
Federal EIN <input style="width: 95%;" type="text"/>	Email <input style="width: 95%;" type="text"/>
	State <input style="width: 95%;" type="text"/>

## Principals

Name <input style="width: 95%;" type="text"/>	Name <input style="width: 95%;" type="text"/>
Title <input style="width: 95%;" type="text"/>	Title <input style="width: 95%;" type="text"/>
Address <input style="width: 95%; height: 40px;" type="text"/>	Address <input style="width: 95%; height: 40px;" type="text"/>
Telephone <input style="width: 95%;" type="text"/>	Telephone <input style="width: 95%;" type="text"/>
Date of Birth <input style="width: 95%;" type="text"/>	Date of Birth <input style="width: 95%;" type="text"/>
SSN or DL# <input style="width: 95%;" type="text"/>	SSN or DL# <input style="width: 95%;" type="text"/>

## Business Information

Business Type	<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Incorporated in the last 12 months	
Length of Ownership	<input style="width: 95%;" type="text"/>				
Annual Sales	<input style="width: 95%;" type="text"/>				
Square Footage	<input style="width: 95%;" type="text"/>				
Location	<input type="checkbox"/> City	<input type="checkbox"/> Commercial	<input type="checkbox"/> Rural	<input type="checkbox"/> Residence	<input type="checkbox"/> Online
Building is	<input type="checkbox"/> Owned <input type="checkbox"/> Rented				



# Credit Application

## Company Information

Bank Name	<input type="text"/>	Telephone	<input type="text"/>
Address	<input type="text"/>	Account Name	<input type="text"/>
		Account Number	<input type="text"/>

## Trade References

List Account Numbers: 2-- for Customer. List 4-- for Open Account

Please indicate desired account status	COD--Customer Check	Open Account	Amount Requested: \$
Amchar Wholesale	<input type="text"/>	Lipsey's	<input type="text"/>
Big Rock Sports	<input type="text"/>	MGE Wholesale	<input type="text"/>
Bill Hicks & Co	<input type="text"/>	MSR Distribution Co	<input type="text"/>
Chattanooga Shooting Supplies	<input type="text"/>	Orion Wholesale	<input type="text"/>
Davidsons	<input type="text"/>	RSR	<input type="text"/>
Glen Zanders	<input type="text"/>	Sports South LLC	<input type="text"/>
Green Supply	<input type="text"/>	United Sporting Companies (Ellett/Jerry's/AcuSport)	<input type="text"/>
Hicks Inc.	<input type="text"/>		

### Reference 1

Name	<input type="text"/>
Account No.	<input type="text"/>
Telephone	<input type="text"/>
Fax	<input type="text"/>

### Reference 2

Name	<input type="text"/>
Account No.	<input type="text"/>
Telephone	<input type="text"/>
Fax	<input type="text"/>

### Reference 3

Name	<input type="text"/>
Account No.	<input type="text"/>
Telephone	<input type="text"/>
Fax	<input type="text"/>

### Reference 4

Name	<input type="text"/>
Account No.	<input type="text"/>
Telephone	<input type="text"/>
Fax	<input type="text"/>

### I Personally Guarantee any and all amounts due in the course business with 2nd Amendment Wholesale

Name	<input type="text"/>	Signature	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>