



PO Box 18564  
BOULDER, CO 80308  
PH: 800-487-1887 FX: 303-938-8201

---

## DEALER CREDIT APPLICATION

### BILLING INFORMATION:

NAME OF FIRM \_\_\_\_\_ PURCHASING CONTACT NAME \_\_\_\_\_  
BILLING CONTACT NAME \_\_\_\_\_ PURCHASING CONTACT EMAIL \_\_\_\_\_  
BILLING ADDRESS \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
\_\_\_\_\_ FEDERAL TAX ID # \_\_\_\_\_  
CITY \_\_\_\_\_ STATE SALES TAX LICENSE # \_\_\_\_\_  
STATE \_\_\_\_\_  
POSTAL CODE \_\_\_\_\_

### APPLICATION INFORMATION:

(CHECK ONE)

CORPORATION  PARTNERSHIP  SOLE PROPRIETOR

YEARS IN BUSINESS \_\_\_\_\_

1. OFFICERS NAME \_\_\_\_\_ OFFICERS TITLE \_\_\_\_\_  
2. OFFICERS NAME \_\_\_\_\_ OFFICERS TITLE \_\_\_\_\_  
3. OFFICERS NAME \_\_\_\_\_ OFFICERS TITLE \_\_\_\_\_

### BANK REFERENCES:

BANK NAME \_\_\_\_\_ CONTACT NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
\_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
CITY \_\_\_\_\_  
STATE \_\_\_\_\_  
POSTAL CODE \_\_\_\_\_

### TRADE REFERENCES:

1. COMPANY NAME \_\_\_\_\_ 2. COMPANY NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_ PHONE \_\_\_\_\_  
FAX \_\_\_\_\_ FAX \_\_\_\_\_

### AUTHORIZATION:

AUTHORIZED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
NAME PRINTED \_\_\_\_\_ TITLE \_\_\_\_\_