



## New Customer Application For Credit

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Accounts Payable Contact: \_\_\_\_\_

Corporation: \_\_\_\_\_ Individual: \_\_\_\_\_ Partnership: \_\_\_\_\_ Other: \_\_\_\_\_  
Date Business Established: \_\_\_\_\_  
Principal owners, Stockholders or Officers – Please give name, address, phone & title:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Trade References:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact: \_\_\_\_\_

### Bank Reference:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact: \_\_\_\_\_

This form must be completed entirely, fax number required for all trade & bank references.

\* By signing this form I give my permission for the above mentioned references (trade & bank) to supply Wolf Paving with any information they request in order to process my application for credit.

I certify that all statements in the application are true and complete and made for the purpose of obtaining credit from Wolf Paving, Inc. I am aware and agree to pay all invoices within 30 days or the account will be placed on C.O.D. Also I understand a finance charge of 1 ½ % will be added on to any unpaid balance until the account is brought up to date.

Your name and title: \_\_\_\_\_ Date: \_\_\_\_\_