

## **Credit Application**

Today's Date:	
	Federal Tax ID #:
	D&B #:
Address:	
City, State, Zip:	
Telephone: FA	
Officer Name:	Titlo:
Officer Name: Cr	nue
Check one:   Sole Proprietorship  Part	thorship. $\square$ Corporation
Type of Pusiness:	illership 🗀 Corporation
Type of Business:	Titlo
Accts. Payable Contact Name: Co	IIIC
Are your purchases exempt from MN Sales	Toy2 - Voc - No /If you places conducts
	Tax? Li tes Li No (II yes, please sello us a
completed state tax exempt form)	□ Voc. □ No
Does your company require a PO number?  Bank and Credit Information	□ fes □ No
	A consumb #4.
Bank Name:	Account #:
Address:	Telephone # ()
a: a: =:	FAX#: ()
City, St, Zip:	
Trade References:	0 1 1
Company Name:	Contact:
Address:	Telephone # ()
	FAX#: ()
City, St, Zip:	
Company Name:	Contact:
Address:	Telephone # ()
	FAX#: ( )
City, St, Zip:	
Company Name:	Contact:
Address:	Telephone # ( )
	FAX#: ()
City, St, Zip:	
Authorization to Poloaco I	nformation and Agreement to Terms
Authorization to Nelease in	mormation and Agreement to Terms
To Whom It May Concorn:	
To Whom It May Concern:	all pertinent credit information necessary to process
our application for credit to: <u>Custom Motors, LLC</u> . By signing and submitting to this credit	
application, I/We certify that the information provided is true and correct and is complete to the	
best of my/our knowledge. I/We acknowledge that I/we have read and understand the terms and conditions of Custom Motors, LLC. and agree to adhere to these credit terms and policies unless	
otherwise agreed to in writing by both partie	<b>5</b> .
Company Name	
Company Name:Authorized Signature:	
Authorized Signature:	Date:
Title:	