



# Commercial Credit Application

## Customer Information

Company Name: \_\_\_\_\_ Trade Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Nature of Business: \_\_\_\_\_  
 City: \_\_\_\_\_ Year Established: \_\_\_\_\_  
 State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Point of Contact: (Accts Payable) \_\_\_\_\_  
 Phone No: ( ) \_\_\_\_\_ Federal Tax ID No: \_\_\_\_\_  
 President/CEO: \_\_\_\_\_ Parent Company if applicable: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Type of Company: Proprietorship Partnership Corporation

D&B Number: \_\_\_\_\_

### Bank References

(1) Branch Name & Address: \_\_\_\_\_  
 Bank Officer: \_\_\_\_\_ Phone No: \_\_\_\_\_ Account No: \_\_\_\_\_  
 Fax No: \_\_\_\_\_ E Mail: \_\_\_\_\_  
 (2) Branch Name & Address: \_\_\_\_\_  
 Bank Officer: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_ Account No: \_\_\_\_\_  
 Fax No: \_\_\_\_\_ E Mail: \_\_\_\_\_

### Carrier/Trade References

(1) Company Name & Address: \_\_\_\_\_  
 Account Number: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_ Fax No: ( ) \_\_\_\_\_  
 Email: \_\_\_\_\_  
 (2) Company Name & Address: \_\_\_\_\_  
 Account Number: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_ Fax No: ( ) \_\_\_\_\_  
 Email: \_\_\_\_\_

### Customer Authorization

**Customer authorizes Verscom LLC and its designees to investigate Customer credit worthiness. It is understood that Verscom LLC will retain this application whether or not it is approved. All information will be held in the strictest confidence.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_