

APPLICATION FOR CREDIT

Company Information

Name of Company: _____ Federal Tax ID: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Principal Officers: _____
Year Established: _____ No. of Employees: _____ DUNS Number: _____
Primary Line of Business: _____
Credit Limit Being Sought: \$ _____ Credit term is Net 30

Bank Reference

Name of Bank: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Contact: _____ Type of Account: _____
Account No.: _____ Credit Line Limit: _____ Year Established: _____

Credit References

Name of Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Contact: _____ Type of Account: _____
Account No.: _____ Credit Limit: _____ Year Established: _____

Name of Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Contact: _____ Type of Account: _____
Account No.: _____ Credit Limit: _____ Year Established: _____

Name of Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Contact: _____ Type of Account: _____
Account No.: _____ Credit Limit: _____ Year Established: _____

This application serves as authorization for the above listed bank and references to release information to the recipient of this application. We certify that all the information on this form is correct.

Signature _____ **Title** _____ **Date** _____

Please return to Lisa.Fletcher@humeratech.com or Fax to 763-255-3299

