



COMMERCIAL CREDIT APPLICATION

COMPANY NAME:	
ADDRESS:	
CITY:	STATE, ZIP:
PHONE:	FAX:
EMAIL:	CONTACT:

REQUEST:	
AMOUNT OF CREDIT REQUESTED:	
PAYMENT PERSONALLY GUARANTEED? Yes <input type="checkbox"/> No <input type="checkbox"/>	
IF YES BY:	POSITION IN THE COMPANY:

TYPE OF ENTITY:
<input type="checkbox"/> CORPORATION (if you are using a fictitious business name, please include the fictitious business name.)
<input type="checkbox"/> LIMITED LIABILITY COMPANY
<input type="checkbox"/> LIMITED PARTNERSHIP
<input type="checkbox"/> PARTNERSHIP
<input type="checkbox"/> SOLE PROPRIETORSHIP
RESALE #:
FEDERAL TAX ID #:
DUNS #:
BUSINESS START DATE:

OWNER SHIP	
NAME:	
ADDRESS:	
CITY:	STATE, ZIP:
PHONE:	EMAIL:
NAME:	
ADDRESS:	
CITY:	STATE, ZIP:
PHONE:	EMAIL:



BANK REFERENCE:

NAME:

ACCOUNT NUMBER:

ADDRESS:

CITY:

STATE, ZIP:

PHONE:

FAX:

EMAIL:

CONTACT:

LANDLORD:

NAME:

LEASE OR RENT AMOUNT PER MONTH:

ADDRESS:

CITY:

STATE, ZIP:

PHONE:

FAX:

EMAIL:

CONTACT:

ENTITY:

1. **Corporation:** Please provide a copy the articles of incorporation and including which state you are incorporated in.
2. **Limited Liability Company:** Please provide a copy from secretary of state of Organization papers.
3. **Limited Partnership, Partnership or Sole Proprietor:** Please provide a copy of your fictitious name registration.
4. **All:** Please provide a copy of your business license if the city you do business in if it requires a business license.

TRADE REFRENCES: (PLEASE LIST 3 MINIMUM)

1. NAME:

ADDRESS:

CITY:

STATE, ZIP:

PHONE:

EMAIL:

WHAT DO YOU PURCHASE FROM THIS VENDOR?



TRADE REFERENCES: (PLEASE LIST 3 MINIMUM)

2. NAME:

ADDRESS:

CITY:

STATE, ZIP:

PHONE:

EMAIL:

WHAT DO YOU PURCHASE FROM THIS VENDOR?

3. NAME:

ADDRESS:

CITY:

STATE, ZIP:

PHONE:

EMAIL:

WHAT DO YOU PURCHASE FROM THIS VENDOR?

PLEASE PRINT FULL NAME, TITLE/ POSITION, DATE, AND SIGN AS AN INDIVIDUAL.

NAME:

TITLE:

SIGNATURE:

DATE:

PERSONAL GUARANTEE:

The within guarantee is made for the benefit of, and to obtain credit on a continuing basis from US GLASS DEPOT LLC. The undersigned hereby guarantees the performance of all obligations of

_____, including but not limited to payment of all present and future indebtedness to US GLASS DEPOT LLC., whether secured or unsecured and regardless of how the indebtedness is represented or incurred and regardless of prior notice, demand or pursuit of remedies against the party primarily liable. The undersigned consents to any extension or alteration of any obligation and guarantees such without prior notice. This guarantee shall continue in effect until the undersigned has notified US GLASS DEPOT LLC. in writing via certified mail of its cancellation, but such cancellation shall not alter any obligation of the undersigned arising thereunder prior to receipt of such written notice.

The undersigned hereby authorizes US GLASS DEPOT LLC. or its agent to investigate his/her credit and authorizes any bank, mortgage lender or landlord, credit reference or any other party to release information to US GLASS DEPOT LLC. or its agent, and hold harmless for said disclosure. The undersigned grants a security interest in all goods sold, and agrees to pay reasonable attorney's fees and cost of collection and interest at the maximum legal rate in the event of any default under this obligation.

NAME:

SOCIAL SECURITY NUMBER:

SIGNATURE:

DATE: