



Atlanta's Premier Kitchen Appliance Dealer

**CREDIT APPLICATION FOR A BUSINESS ACCOUNT**

\*\*\*COMPLETE THE FORM BELOW IN ITS ENTIRETY. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.\*\*\*

**BUSINESS CONTACT INFORMATION**

Name(s):		Title:	
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP Code:	
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:

**BUSINESS AND CREDIT INFORMATION**

Primary business address:		
City:	State:	ZIP Code:
How long at current address?		
Telephone:	Fax:	
E-mail (invoices may be sent to this address):		
Bank name:		
Bank address:	Phone:	
City:	State:	ZIP Code:
Requested credit amount: \$		

**BUSINESS/TRADE REFERENCES**

Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:

3583-D CHAMBLEE-TUCKER RD., N.E.   ATLANTA, GEORGIA 30341
770.451.0136 P   770.234.4105 F   WWW.HOWARDPAYNE.COM

Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
AGREEMENT		
<ol style="list-style-type: none"> <li>1. First order is to be pre-paid. All future invoices are to be paid 30 days from the date of the invoice.</li> <li>2. Late invoices subject customer to cancellation of credit and possible property liens.</li> <li>3. By submitting this application, you authorize Howard Payne Company, Inc. to make inquiries into the banking and business/trade references that you have supplied.</li> </ol>		
SIGNATURES		
Print Name:	Print Name:	
Title:	Title:	
Signature:	Signature:	
Date:	Date:	