



# Credit Application

## Company Information

Name of Firm: (in full) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Sales Tax #: \_\_\_\_\_

### Type of Business:

Individual  Partnership

Corporation

Other

### Nature of Business:

Distributor

Retailer

Other

If you are in a state that charges Sales Tax, please mail in your Sales Tax Certificate for Exemption with your signed Credit Application to Coghlan's Ltd.

## Bank Information

Main Product: \_\_\_\_\_

Credit Limit Requested: \_\_\_\_\_

No. of Employees: \_\_\_\_\_

Years in Business: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_

Zip/Postal: \_\_\_\_\_

AP Contact: \_\_\_\_\_ AP Phone #: \_\_\_\_\_ AP Email Address: \_\_\_\_\_

## Trade References You must list at least 4 references for Coghlan's to process the application. (Preferred contact method is email.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Prov: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Prov: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Prov: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Prov: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Principle(s): \_\_\_\_\_

DUNS#: \_\_\_\_\_

\_\_\_\_\_ For OPEN ACCOUNT CREDIT LIMIT \_\_\_\_\_

\_\_\_\_\_ This Application is for information purposes only, we will pay by Visa, Mastercard, American Express or cheque in advance

I hereby apply to Coghlan's Ltd. for a credit account. I warrant that the information shown here is true. I hereby authorize the person or firm to whom this application is made to investigate the references/information given in this application.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_