Credit Application / Information Sheet

Email this application to: admin@sturdi-usa.com

Name of Applicant (Company): _____

Your Name/Title: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Ph. _____ E-Mail: _____

Select type of organization (Check One): _ US Corp   Partnership _ Individual _ Government Entity _ LLC   _ Non-Profit

Is organization less than 1 (one) year old? _____ D&B Number: _____ Annual Sales: _____

Names of Principals, Partners and Officers (Use an additional sheet if necessary)

Name	Address	Position Held	Phone#
Name	Address	Position Held	Phone#
Name	Address	Position Held	Phone#

Bank Information:

Bank Name	Address		Phone#

Account Number	Bank Officer Name	Dept.	Phone/Extension

Trade References (Industry related purchases within the past 12 months):

1. _____

2. _____

3. _____

_____   _____
Signature of Authorized Applicant   Date

_____
Printed Name