

# StaticFaction, LLC

## APPLICATION FOR CREDIT

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_ Fax No. \_\_\_\_\_

Address \_\_\_\_\_ Web Site Address: \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Type of Business \_\_\_\_\_ A/P Contact \_\_\_\_\_ A/P Phone \_\_\_\_\_

A/P Fax \_\_\_\_\_ A/P email \_\_\_\_\_

Corporation in State of \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_ Year Established \_\_\_\_\_

Federal Tax I.D. Number \_\_\_\_\_ Resale Certificate No. \_\_\_\_\_

Officers: \_\_\_\_\_ Title \_\_\_\_\_

\_\_\_\_\_ Title \_\_\_\_\_

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### TRADE REFERENCES (\*\*All Information Below is Required\*\*)

<u>Company Name</u>	<u>Email</u>	<u>Telephone</u>	<u>Fax Number</u>
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1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

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### BANK INFORMATION

Name of Bank \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_

Acct. No. \_\_\_\_\_ Telephone \_\_\_\_\_ Fax No. \_\_\_\_\_

I/We hereby certify that the above information is given for the purpose of obtaining credit with StaticFaction, LLC. and is warranted to be true. I/We hereby authorize StaticFaction, LLC. to investigate the references listed pertaining to my/our credit and financial responsibility. A copy of this document is as valid as the original. **If credit is extended, I/we agree that invoices will be paid within 30 days of invoice date.**

\_\_\_\_\_  
Officer Name

\_\_\_\_\_  
Officer Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date