CDR GRAPHICS

Architectural
Digital Imaging
Large Format Printing
Managed Print Services
Digital On Demand Printing

BUSINESS CREDIT APPLICATION

Business Name	
Street Address	
City	
Phone & Fax	
Legal Ownership	☐Partnership ☐Proprietorship ☐Corporation ☐Other
Principal	Name: Title:
Tax ID# or SS#	
Purchase Order	☐Required ☐Not Required

Banking Information

Bank Name		
Bank Address		
Bank Phone & Fax		
Account Number	Checking:	Saving:
Principal	Name:	Title:
Tax ID# or SS#		

Trade References

1.	
2.	
3.	

It is agreed that if a line of credit is extended to your organization, payments will be tendered in accordance with CDR Graphics, Inc. selling terms of net 30 days. Each invoice is subject to a finance charge of 18% percentage annually if not paid within 30 days. The undersigned has read this credit application and agrees to be bound by it's terms and conditions stated herein.

_____ _____ _____
Authorized Signature Print Full Name Date

Information Release Authorization

Company Name	
Street Address	
City, State, Zip	
Phone & Fax	Phone: Fax:

Bank Use Only

Account Number _____ ☐Satisfactory ☐Unsatisfactory
Date Opened _____/_____/_____ ***Completed by*** _____
Average Balance $ _____***Title***_____***Phone***_____

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