Wilder Diamond Blades

733 State Rt 2035
Nicholson PA 18446
Phone: 800-214-9424 Fax: 570-222-2239

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

	BUSINESS C	ONTACT INFORMATION	
Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company addre	ess:		
City:		State:	ZIP Code:
Date business commenced	d:		
Sole proprietorship:	Partnership:	Corporation:	Other:
	BUSINESS AN	D CREDIT INFORMATION	
Primary business address:	:		
City:		State:	ZIP Code:
How long at current addre	ess?	-	
Telephone:	Fax:	E-mail:	
Bank name:		-	
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account	Account number	<u> </u>	
Savings			
Checking			
Other			
	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:	
Type of account:			
	1	AGREEMENT	
1. All invoices are to be	paid 30 days from the dat	e of the invoice.	
2. Claims arising from in	voices must be made with	in seven working days.	
3. By submitting this app and business/trade re	olication, you authorize Wi ferences that you have su	ilder Diamond Blades LLC. topplied.	o make inquiries into the banking
	5	SIGNATURES	
Title: Date:		Title: Date:	