



Soft Credit Check Application

Business Name A/P Contact Name

Invoicing Address A/P Phone/Email

City How old is the business (yrs.)

Postal Code Type of Business

Business Phone/Email

Type of ownership Corporation Partnership Sole Proprietor

Principle owner/President Email Address

Controller/Financial Officer Email Address

Trade References (No customers, utility companies or friends/family)

	Business Name	Account Number	Contact Name	Phone/Email
1.
2.
3.

Are you presently 60 days or more days past due with any supplier Yes No

If yes, please explain

How much casual labors are you requesting? (Number of hours)

Bank References Checking Loan Savings

Bank Name	Account #	Contact Name	Contact Phone/Email
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I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in the credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

X _____
Name (Printed)

X _____
Title

X _____
Signature

X _____
Date