

Charge Account Application Form

CORPORATE INFORMATION

Date	
Company Name	
Address	
Phone	Fax
Type of Business	
Name of Individual	
Title	

BANK REFERENCE

Bank Name	
Bank Address	
Contact Person	Phone
Account No	

Name of 3 references that you're currently doing business with

Name of Business	
Contact Person	Phone
Name of Business	
Contact Person	Phone
Name of Business	
Contact Person	Phone

Please indicate if this account should be:

open to all employee restricted to specific individuals (please list names)

Please open an account as specified above. My firm will comply with payment terms of net 30 days.

Signature

Date
