

MYRON ♦ ZUCKER

APPLICATION FOR CREDIT

Please fill out the following credit application out as completely as possible. Return via email to cmachini@myronzucker.com or fax to (586) 979-9484.

Applicant will be notified upon approval of application. For your convenience, we also accept MasterCard, VISA, and American Express.

BUSINESS NAME: _____	OWNER NAME: _____	
ADDRESS: _____		
PHONE: _____	FAX: _____	EMAIL: _____
TYPE OF BUSINESS: _____		DATE ESTABLISHED: _____
TAX ID NO.: _____	D&B NUMBER: _____	

BANK REFERENCES (include at least one)

BANK NAME: _____	
ADDRESS: _____	
PHONE: _____	ACCOUNT NO: _____
BANK NAME: _____	
ADDRESS: _____	
PHONE: _____	ACCOUNT NO: _____

TRADE REFERENCES (terms equal to or greater than terms requested)

NAME: _____		
ADDRESS: _____		
PHONE: _____	FAX: _____	EMAIL: _____
NAME: _____		
ADDRESS: _____		
PHONE: _____	FAX: _____	EMAIL: _____
NAME: _____		
ADDRESS: _____		
PHONE: _____	FAX: _____	EMAIL: _____

By submitting this application, you authorize Myron Zucker, Inc. to make inquiries into the banking and business/trade references that you have supplied.

Name: _____ Date: _____

www.myronzucker.com

36825 Metro Court · Sterling Heights, MI 48312 | (800) 245-0583 | (586) 979-9955 | Fax (586) 979-9484

POWER ♦ QUALITY