

Mercury Pen Co. Inc.

CREDIT APPLICATION

Business Name:

Billing Address:

Ship To:

Telephone:

Fax:

Buyer's Name:

A/P Contact:

Owners:

Legal Status of Business:

Date Bus. Started:

S.S. #

Or Federal Resale #

DUNS #:

Rating:

Type of Business:

If Other:

Bank Name:

Account #:

Address:

Bank Contact:

Telephone:

Fax:

IMPORTANT: According to the Fair Credit Act, your bank cannot furnish us with information without your approval. Please contact them, customer's written authorized signature necessary.

Three Trade References (Name, Address, Telephone and Fax)

1.

2.

3.

IMPORTANT: Until credit has been established you have the option of COD or payment in advance.

How Did You Hear About Us:

If Other:

Position of Applicant:

Signature: _____ **Date:**