

APPLICATION FOR CREDIT

Firm _____

Mailing Address _____

Shipping Address _____

City _____ State _____ Zip _____ Phone _____

REFERENCES

Name _____ City _____ State _____

Phone _____ Fax _____ Account # _____

Name _____ City _____ State _____

Phone _____ Fax _____ Account # _____

Name _____ City _____ State _____

Phone _____ Fax _____ Account # _____

Bank Name _____ City _____ State _____

Phone _____ Fax _____ Account # _____

Terms: Net 30 days, upon approval of credit. 1.5% interest charged on unpaid balance.

I understand that this is a credit application and as such I authorize Popp Binding & Laminating, Inc. to make inquiries into my credit. If credit is granted I agree to the stated terms of payment upon receipt of the invoice.

Date _____ Signed _____

Title _____

**** Please do not write in the space below ****

VERIFICATION: References checked by _____ Approved by _____ Date _____