

# ACCOUNT APPLICATION

Business or Corporate Name:		Application Date:	
Federal Taxpayer ID:		Number of Employees:	Monthly Credit Needed:
Business Address:		City:	State: Zip:
Billing Address (if different):		City:	State: Zip:
Business Phone:		Business Fax:	
Year Established:	Type of Business: <input type="checkbox"/> Inc. <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____		
Accounts Payable Contact:		Accounts Payable Email:	
Accounts Payable Phone:		Accounts Payable Fax:	
<b>OWNERS (include attachment if more than one):</b>			
Name:		Title:	Social Security Number:
Home Address:		City:	State: Zip:
Cell #:		Email:	
<b>BANK OR SAVINGS &amp; LOANS ASSOCIATION:</b>			
Name:			
Branch Address:		City:	State: Zip:
Account #:	Phone #:	Contact Name:	
Name:		City:	State: Zip:
Branch Address:			
Account #:	Phone #:	Contact Name:	
<b>TRADE REFERENCES (at least 3x creditors, no credit cards):</b>			
Name:		Acct #:	
Address:		City:	State: Zip:
Phone #:	Fax:	Contact Name:	
Name:		Acct #:	
Address:		City:	State: Zip:
Phone #:	Fax:	Contact Name:	
Name:		Acct #:	
Address:		City:	State: Zip:
Phone #:	Fax:	Contact Name:	
Has Applicant or any of it's owners, principles, partners, officers or directors ever filed for bankruptcy, been adjudged bankrupt or made an assignment for the benefit of creditors? <input type="checkbox"/> NO <input type="checkbox"/> YES (If yes, please attach a detailed explanation)			
For the purpose of establishing a credit line with Geronimo Creek, Inc., I hereby authorize the above named Bank and Trade References to furnish the requested account/credit information.			
Authorized By (Name):			Title:
Signature:			Date:



GERONIMO CREEK

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