



4314-5 Saint Augustine Rd.
Jacksonville, Florida 32207.
Phone number: (904) 858-1565
Fax: (904) 693-3074

Credit Application

Company Name: _____

DBA or Tradestyle: _____

Address: _____

City and State: _____

Phone Number: _____

Nature of Business: _____

Date Business Started: _____

Type of Business: _____ "S" or _____ "C" Corp _____ Partnership _____ Sole Owner _____ LLC

Principals/Owners: _____

Federal Tax ID Number: _____

Bank Reference: _____

Address: _____

City & State: _____

Contact Name: _____

Phone Number: _____

Account Numbers: _____

Trade References

Name: _____

Address: _____

City & State: _____

Phone Number: _____

Name: _____

Address: _____

City & State: _____

Phone Number: _____

PLEASE ATTACH FISCAL YEAR END FINANCIAL STATEMENT.

I hereby authorize this corporation or any Credit Bureau or Investigative Agency employed by this corporation to investigate any references, statements, or other data obtained from me or from any other person pertaining to my credit and financial responsibility. Additionally all statements made herein above are represented and warranted as being true and correct in all respects, and I acknowledge that this corporation materially will rely thereon in decision to extend and/or continue credit to my Company. Furthermore, I agree to notify this corporation of any material changes in the above information as they may occur whether before or following the initial extension of credit.

Authorized signature (Must be Owner, Partner, or Officer of Corp.)

Please fax to Pure Vinyl Fence Systems, Inc. Credit Department at (904) 693-3074
or mail to 4314-5 Saint Augustine Rd., Jacksonville, FL 32207