



LEGENDARY RELIABILITY SINCE 1927

a division of Orbix Corporation

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CONFIDENTIAL CREDIT APPLICATION

COMPANY INFORMATION

FIRM NAME, BILL TO ADDRESS, CITY - STATE - ZIP, SHIP TO ADDRESS, CITY - STATE - ZIP, PHONE #, FAX #, FEDERAL TAX I.D. #, E-MAIL, CORPORATION, PARTNERSHIP, SOLE PROPRIETORSHIP, NUMBER OF YEARS IN BUSINESS, # OF EMPLOYEES, PRINCIPAL BUSINESS OR PRODUCT, D&B #, OWNER AND/OR OFFICERS

TRADE REFERENCES: LIST 4 MAJOR SUPPLIERS

NAME, ADDRESS, CITY - STATE - ZIP, ACCOUNT NUMBER, PHONE #, FAX # (repeated for 4 suppliers)

BANK REFERENCES

NAME, ADDRESS, CITY - STATE - ZIP, ACCOUNT NUMBER, PHONE #, FAX # (repeated for 2 banks)

I AUTHORIZE THE RELEASE OF ACCOUNT INFORMATION TO PETOL-GEARENCH FOR THE PURPOSE OF ESTABLISHING OPEN CREDIT TERMS.

SIGNED _____

TITLE _____ DATE _____