



PO Box 630
120 S Broadway
Pelican Rapids, MN 56572
P. 218-863-2811
F. 218-863-2825

Credit Application for BUSINESS

Name/Address:

Authorized Representative: _____ Title: _____

Name of Business: _____

Address: _____

Phone: _____ Fax: _____

In Business Since: _____ Type of Business: _____

Corporation: _____

Partnership: _____

Credit Information:

Bank References:

Bank Name: _____ Contact: _____

Address: _____ Phone: _____

Bank Name: _____ Contact: _____

Address: _____ Phone: _____

Trade References:

Company Name: _____ Contact: _____

Address: _____ Phone: _____

Company Name: _____ Contact: _____

Address: _____ Phone: _____

Purchases made during one month are due in full before the end of the following month. A finance charge of 1.5% per month (18% annual percentage yield) will be assessed on past due balances

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended

Signature: _____ Date: _____

Signature: _____ Date: _____