

CREDIT APPLICATION

COMPANY: _____ YEARS IN BUSINESS: _____
DEBTOR

STREET ADDRESS: _____ MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: () _____ - _____ FAX: () _____ - _____ EMAIL: _____

CORPORATION: () PARTNERSHIP: () INDIVIDUAL: ()

TYPE OF BUSINESS: _____ HOW LONG AT THIS ADDRESS: _____

FEIN: _____ LINE OF CREDIT REQUESTED: _____

<u>NAME OF PRINCIPAL(S):</u>	<u>ADDRESS:</u>	<u>S.S.#:</u>	<u>DOB:</u>
1. _____	_____	____-____-____	_____
2. _____	_____	____-____-____	_____
3. _____	_____	____-____-____	_____

DO YOU HAVE MORE THAN ONE LOCATION OR OFFICE? _____

IF YES, PLEASE LIST ADDITIONAL LOCATIONS: _____

HAS THIS COMPANY EVER BEEN SUED OR PLACED IN COLLECTIONS? _____

IF YES, PLEASE EXPLAIN: _____

WHO IS THE PERSON RESPONSIBLE FOR ACCOUNTS PAYABLE? _____

TRADE/BUSINESS REFERENCES:

- | | | | | | |
|----|------|-------|-----|---------|-----------|
| 1. | Name | Phone | Fax | Contact | Account # |
| 2. | Name | Phone | Fax | Contact | Account # |
| 3. | Name | Phone | Fax | Contact | Account # |

SIGNATURE _____

DATE _____

THE UNDERSIGNED AS INDUCEMENT TO GRANT CREDIT WARRANTS THE INFORMATION SUBMITTED IS TRUE AND CORRECT. MOUNTAIN TEMP SERVICES IS AUTHORIZED TO INVESTIGATE THE CREDIT INFORMATION LISTED.