



534 W. WESTFIELD AVENUE
ROSELLE PARK, NEW JERSEY 07204
PHONE: (908) 259-9000 FAX: (908) 259-9040

CREDIT APPLICATION

NAME OF BUSINESS: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TEL: _____ FAX: _____

E-MAIL ADDRESS: _____ AT PRESENT LOCATION SINCE: _____

MAILING ADDRESS: _____

TYPE OF BUSINESS: _____ DATE ESTABLISHED: _____

OWNERSHIP (CHECK ONE): _____ SOLE PROPRIETORSHIP _____ PARTNERSHIP _____ CORPORATION

PROPRIETOR/PATNERS: (OWNER(S)) _____

CORPORATION: (City, State of Incorporation) _____

PARENT COMPANY NAME (If a Division or Subsidiary) _____

A/P CONTACT: _____ TEL: _____ FAX: _____

CREDIT REFERENCES:

1. NAME: _____ TEL: _____ FAX: _____

ADDRESS: _____

2. NAME: _____ TEL: _____ FAX: _____

ADDRESS: _____

3. NAME: _____ TEL: _____ FAX: _____

ADDRESS: _____

4. NAME: _____ TEL: _____ FAX: _____

ADDRESS: _____

BANK REFERENCES: Tel: _____ Fax: _____ E-mail: _____

Name: _____ Branch: _____

Address: _____ City: _____ State: _____ Zip: _____

Checking Account No: _____ Savings Account No. _____

Loan Account No. _____ Bank Contact: _____

Amount of Credit Desired Monthly: _____

Should you approve this application, I (we) agree to pay for all goods purchased within the terms stated within the invoice. Casa di Trevi is authorized to contact *any references or banks listed above*. It is understood that nay information so obtained will be used solely for the basis of granting credit.

SHOULD IT BECOME NECESSARY TO COLLECT THIS ACCOUNT BY LEGAL PROCEEDINGS OR OTHERWISE THE UNDERSIGNED, INCLUDING ENDORSERS, PROMISE TO PAY ALL COST OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES.

Casa di Trevi



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CREDIT APPLICATION - CUSTOMER BANK AUTHORIZATION

DATE: _____

CUSTOMER: _____

CUSTOMER SECTION: FILL IN BLANK SPACES

I, _____, authorize _____
(Customer Name-Signature please!) (Name of Banking Institution)

to release the following requested information to Casa di Trevi for the purpose of opening a credit account.

ACCOUNT#: _____

BANK SECTION: FILL IN BLANK SPACES

AVERAGE BALANCE: _____

DATE OPENED: _____

NSF CHECKS: _____

SECURED/UNSECURED: _____