

Credit Application

Please Type or Print.

Use the tab key or mouse to navigate form fields.

I	Business Name:				Date:	
Dur	n & Bradstreet #:	EIN	N/TAX ID #			
	Billing Address:					
	City:		State:		Zip Code:	
	Telephone:	Fax:		Date E	Business Started:	
	Key Contact Email Addre					mm/dd/yyy
	of Ownership (check one):	Proprietorship	Partnership	Corporation		
	President:			State of	of Incorporation:	
PAR	TNERSHIP					
Par	tner's Names:					
Туре	of Partnership:				Date Formed:	
	(general, limited, et	c)				mm/dd/yyyy
SOL	E PROPRIETORSHIP					
0	wner's Name:					
LAN	DLORD					
	Name:				Telephone:	
BAN	K REFERENCE					
	Bank:			Account No.:		
	Telephone:	Fax:		Contact:		
CRE	DIT REFERENCES					
1.	Company:					
	Address:		City	<i>'</i> :	State:	
	Zip Code:	Telephone:			Fax:	
2.	Company:					
	Address:		City	/ :	State:	
	Zip Code:	Telephone:			Fax:	
3.	Company:					
	Address:		City	y :	State:	
	Zip Code:	Telephone:			Fax:	
4.	Company:					
	Address:		City		State:	
	Zip Code:	Telephone:			Fax:	

	FORMATION hber Required?	□No					
If NO, List	Approved Buyers: Contact N	lame	Telephone	Function			
CREDIT A	GREEMENT						
			approved the applicant	(hereinafter called the "customer"			
•	to the following terms and cond		abasad by the systems	r is due within 20 days ofter the			
A.	date of the invoice.	terials and services pur	cnased by the custome	r is due within 30 days after the			
B.	Interest shall be paid by the customer on all past due invoices at 1.5% per month. Customer agrees that if any						
	invoices go beyond 30 days pa	ast due, all invoices bec	ome due and payable ι	ipon demand, and in such case, if			
		deems it necessary to seek outside assistance for recovery, customer agrees to pay all costs of					
collection (not less that 25%, but not more than 33%), as well as court costs and reasonable attorne through and including the appellate level.							
C. All payments agreed to under this Agreement shall be paid to The Chariot Group, Inc. 3120 Denali Stree							
	1, Anchorage, AK 99503.	-		•			
D.	Customer hereby authorizes a	Il companies and financ	ial institutions to releas	e credit information to seller.			
seller, a Further, applicar bind the	and the undersigned hereby ack the undersigned has read the not named herein is hereby bour	nowledges the truthfuln foregoing application for do by its terms and cond and that in the event the	ess and accuracy of the r credit and credit agree itions, and hereby state				
Data		la mana					
Date: _	N (please	lame: print)	(authorized ag	ent)			
	Sign	ature:					
	_	Title:					
You ma	y fax or mail this information to	the following:					
The Ch	ariot Group, Inc.	PH: 907-222-5300					
	enali Street, Suite 1	FX: 907-222-7641					
Anchora	age, AK 99503 counting Department	ar@chariotgroup.com					

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