



16443 Minnesota Avenue  
Paramount, CA 90723  
Phone: (562) 634-8635  
Fax: (562) 531-3776  
Email: sales@mattcoforge.com

## CREDIT APPLICATION

### General Information:

Business Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Mailing Address (if Different):

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phones: Voice: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

### Type of Business:

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_

### Resale Numbers:

California Resale Number: \_\_\_\_\_  
Arizona Resale Number: \_\_\_\_\_  
Connecticut Resale Number: \_\_\_\_\_  
Massachusetts Resale Number: \_\_\_\_\_

How long have you been in business? \_\_\_\_\_

How much credit is requested? \_\_\_\_\_

### Corporate Officers, Partners or Sole Proprietor:

Name \_\_\_\_\_ Title \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_

Accounts Payable Contact Person: \_\_\_\_\_

### Bank Reference:

Bank Name \_\_\_\_\_  
Address \_\_\_\_\_

Phones Voice: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Check Account Number: \_\_\_\_\_

Loan Account Number: \_\_\_\_\_