



MANUFACTURING SOLUTIONS

CREDIT APPLICATION – PLEASE COMPLETE AND EMAIL TO admin@cimquest-inc.com

Quoting Engine LoginName: _____ Email Address: _____

A. APPLICANT				
Legal Business Name		Type of Business		Number of years/months in business
List all trade names, DBAs, divisions, or subsidiaries				Contact person (Direct line/Ext)
Street Address			Mailing Address (if different from Street Address)	
City	State		Zip Code	
Business Phone # (incl. area code)		Fax # (incl. area code)		e-Mail Address
Ship To Address (Provide as much detail as possible, i.e., Lab #, dept., attention to, etc.)				
Bill To Address (if different from Ship To Address)			Will a leasing company be used as the Bill To for any orders? Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes", please explain.	
B. BUSINESS INFORMATION				
Sole Proprietorship – Name of Proprietor				
Partnership – Name of Partner(s)				
Corporation/LLC President/Member				
Federal Tax # (if applicable)		Sales Tax Exempt: Yes _____ No _____ If "Yes", attach copy of certificate		
C. BANKING INFORMATION				
Name of Bank/Branch		Account Number	Type of Account	
Address		Phone #	Fax #	
Bank Officer Contact		Contact's Direct line/Ext		
<i>I/We hereby authorize Bank named above to release information requested for the purpose of obtaining and/or reviewing credit.</i>				
D. TRADE REFERENCES				
Company Name	Contact Name/Title	Address	Phone #	Fax #
E. CREDIT CARD INFORMATION - A Company credit card must be provided and will be used if agreed upon terms set forth in the particular proposal are not met.				
Card Type: (circle one) MC Visa AMEX				
Card No.: _____		Exp. Date : _____		CID (3 or 4 digits) : _____
Card Holder Name: _____		Billing address of this credit card: _____		
Signature: _____		_____		
Print Name: _____		Telephone # above person can be reached at: _____		