

CREDIT APPLICATION



Company Name

Telephone Number

Physical Address

Fax Number

City State Zip Code

Number of Years at this Address

Mail or Fax Application to: A-Z Bus Sales, Inc.
P.O. Box 700
Colton, CA 92324-0700

Attn: Vivian Gainer
Phone: 951-781-1813
Fax: 951-840-2276
Email: vgainer@a-zbus.com

If items being purchased will be for resale, please attach the Resale Certificate completed and return with the Credit Application.

Resale Certificate Enclosed

OWNERSHIP/CUSTOMER INFORMATION:

Name (President) Address City State Zip Code

All information will be held in strictest confidence.

Corporation Partnership Proprietorship Individual Incorporated within last 12 Months Other: _____

FINANCE

Bank Name Telephone and Fax Number

Address City State Zip Code Account Number(s)

References

Name Address City State Zip Code

Telephone Number Fax Number Account Number Contact Person

Name Address City State Zip Code

Telephone Number Fax Number Account Number Contact Person

Name Address City State Zip Code

Telephone Number Fax Number Account Number Contact Person

CREDIT APPLICATION, *continued*

Accounts Payable Contact Information:

Name of Contact Person

Email Address

Telephone Number

Ext

Fax Number

Billing Address:

City

State

Zip Code

I (We) certify that the above information is true and correct, and that we can and will comply with your terms. I (We) also authorize the release of information from any institution listed above. Terms are net 30 from the date of invoice. Terms are net 30 days from the date on the invoice. A 1.5% per month (18% per annum) will be charged on all past due accounts.

Date

Signature

Title

Internal Use Only: _____

Credit Rating

Approval

County Code

City Code