

# Commercial Credit Application

## Michael's Keys, Inc. Locksmith

206 W Bedford Euless Rd. , Hurst Tx 76053

Ph. (817) 498-9797

Terms - Net 30 Days

*(Please eMail the completed form back to us for consideration)*

[accounting@michaelskeys.com](mailto:accounting@michaelskeys.com)

### **Business Information**

Business Name \_\_\_\_\_ DBA \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ eMail \_\_\_\_\_ Year Established \_\_\_\_\_

President / Owner \_\_\_\_\_ Parent Company \_\_\_\_\_

Business Type : Sole Proprietor,\_\_\_\_ Partnership,\_\_\_\_ Association,\_\_\_\_ Corporation,\_\_\_\_

Nature of Business \_\_\_\_\_

Federal Tax ID# \_\_\_\_\_

Ever Filed Bankruptcy? Yes \_\_\_ No \_\_\_ Franchise? Yes \_\_\_ No \_\_\_

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

Accounts Payable Contact \_\_\_\_\_ eMail \_\_\_\_\_

Phone# \_\_\_\_\_

### **Financial Information**

Bank Name \_\_\_\_\_ Branch \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

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

Account Number \_\_\_\_\_ Years with Institution? \_\_\_\_\_

Primary Account Holder \_\_\_\_\_

Purchase Order Required? Yes \_\_\_ No \_\_\_

**It is your responsibility to give the PO# to our technician when he does the job. If you fail to do so, payment will still be required.**

### **References**

Company Name \_\_\_\_\_ Contact \_\_\_\_\_

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

Phone# \_\_\_\_\_ eMail \_\_\_\_\_

**Company Name** \_\_\_\_\_ **Contact** \_\_\_\_\_

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

**Phone#** \_\_\_\_\_ **eMail** \_\_\_\_\_

**Company Name** \_\_\_\_\_ **Contact** \_\_\_\_\_

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

**Phone#** \_\_\_\_\_ **eMail** \_\_\_\_\_

I understand that the above information is given for the purpose of obtaining credit and I certify that, to the best of my knowledge, the above information is complete and accurate as of the date of this application. In the event of non-payment, I agree to pay all costs incurred for collections not limited to attorney fees and court costs.