Thanks A Lock Locksmith CREDIT APPLICATION FOR A BUSINESS ACCOUNT

| BUSINESS CONTACT INFORMATION | | | | | |
|---------------------------------|-----------------------------|--------------------------|-----------------------------|--|--|
| Title | | Date business commenced | | | |
| Company name | | ☐ Sole proprietorship | | | |
| Phone Fax | | ☐ Partnership | | | |
| E-mail | | ☐ Corporation | | | |
| Registered company address | | □ Other | | | |
| City, State ZIP Code | | | | | |
| BUSINESS AND CREDIT INFORMATION | | | | | |
| City, State ZIP Code | | Bank name: | | | |
| How long at current address? | | Primary business address | | | |
| | | City, State ZIP Code | | | |
| Phone | | Phone | | | |
| Fax | | Account number | | | |
| E-mail | | Type of account | □Savings □ Checking □ Other | | |
| BUSINESS/TRADE REFERENCES | | | | | |
| Company name | | Phone | | | |
| Address | | Fax | | | |
| City, State ZIP Code | | E-mail | | | |
| Type of account | | Other | | | |
| Company name | | Phone | | | |
| Address | | Fax | | | |
| City, State ZIP Code | | E-mail | | | |
| Type of account | | Other | | | |
| Company name | | Phone | | | |
| Address | | Fax | | | |
| City, State ZIP Code | | E-mail | | | |
| Type of account | □Savings □ Checking □ Other | Other | | | |
| AGREEMENT | | | | | |

- 1. All invoices are to be paid 30 days from the date of the invoice.
- 2. Claims arising from invoices must be made within seven working days.
- 3. By submitting this application, you authorize Thanks A Lock to make inquiries into the banking and business/trade references that you have supplied.

| SIGNATURES | | | | |
|----------------|--|----------------|--|--|
| Signature | | Signature | | |
| Name and Title | | Name and Title | | |
| Date | | Date | | |