

CREDIT APPLICATION

For the sole purpose of establishing credit with FabCo Industrial Services, the undersigned furnishes the following information. Applicant represents and warrants said information is true and correct.

Company N	Name:				
DBA:					
Bill to Addr	ress:				
Ship to Add	dress:				
Office Phor	ne		Fax:		
Maintenan	ce Contact:		Phone:		
Accounts Payable Contact:			Dhono		
Type of Business: Ye			Year Established:		
Sole Prop:		Corporation:	Partnership:		
Federal ID	Number:		_		
Sales Tax E	xempt ye	esno <i>Cer</i>	tificate of Exemption, r	equired if Tax E	Exempt
		Own	er or Officers		
Name & Title		Address			Phone
					
			ng Information		
Name of In	stitution	Address	-	ccount #	Contact
rame of montation					Contact
		<u> </u>			
		Business Reference	es (List at least 3 Supplie	ers)	
Name		Address	Phone		Fax
Signature		Title		D	ate
	Return to:	FabCo Industrial Service	E-Mail to ei	ther lori@f	abcoind.com
		PO Box 65		missy(@fabcoind.com
		Neenah, WI 54957	Fax to	(920) 7	729-5066



CREDIT INFORMATION RELEASE AUTHORIZATION

		Co Industrial Services, or any of its re lars, which may be requested regard credit history.	
(your comp	oany name)	_	
· ·	nake multiple duplica	horize <u>FabCo Industrial Services,</u> or a ates of this form to be used in conne (your company name)	•
•	ntatives, of all liabilit	nd forever discharge and release <u>Fal</u> ty, whether known or unknown, that (your company name)	-
Signature:			
Printed Name:			
Title:			
Company:			
Date:			