

Yorkland Controls



www.yorkland.net

OFFICE USE ONLY
 Approved by: _____
 Date: _____
 Credit Limit: _____
 Selling Level: _____
 Branch Default: _____

CUSTOMER CREDIT APPLICATION

Company Name: [Text Box]	Telephone #: [Text Box]
Street Address & City: [Text Box]	Fax # [Text Box]
Owner Name/Address: [Text Box]	Website: [Text Box]
Email: [Text Box]	

Nature of Business: Please check one.

Contractor <input type="checkbox"/>	Manufacture(OEM) <input type="checkbox"/>	Distribution <input type="checkbox"/>	Property Management <input type="checkbox"/>	Owner <input type="checkbox"/>	Other(Specify) <input type="checkbox"/>
[Text Box]					

Finance Institution: [Text Box]	Contact Name: [Text Box]
Address: [Text Box]	Telephone: [Text Box]
	Fax: [Text Box]

Sales Contact: [Text Box]	Telephone #: [Text Box]	Email: [Text Box]
Purchaser Contact: [Text Box]	Telephone #: [Text Box]	Email: [Text Box]
AP Contact: [Text Box]	Telephone #: [Text Box]	Email: [Text Box]
Invoicing Email: [Text Box]	Statement Email: [Text Box]	

Trade References:

Company Name:	Contact Name:	Email:	Fax:
1. [Text Box]	[Text Box]	[Text Box]	[Text Box]
2. [Text Box]	[Text Box]	[Text Box]	[Text Box]
3. [Text Box]	[Text Box]	[Text Box]	[Text Box]

The undersigned agrees that the usual credit inquiries may be made at any time in conjunction with the credit hereby applied for and consents to the disclosure of such information to any person or to any credit reporting agency with whom the undersigned has or may have financial relations. The undersigned affirms that the information given herein is true and correct as of the date signed.

Signature _____

Print _____

Date _____