

200 BUFFALO AVENUE FREEPORT, NY 11520

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CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION			
Title:			
Company name:			
Phone:	Fax:	E-mail:	
Primary address:			
City:		State:	ZIP Code:
BANK REFERENCE			
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account:	Account number:		
☐ Checking ☐ Savings ☐ Other			
BUSINESS/TRADE REFERENCES			
#1 Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
#2 Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
#3 Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
AGREEMENT			
By submitting this application, you authorize ALL AMERICAN METAL CORP. to make inquiries into the banking and business/trade references that you have supplied.			
SIGNATURE			
Signature: Print Name: Title: Date:			