



Credit Application
Fax: 212-768-0220

Full Name _____	Title _____
Email _____	Website _____
Business Name _____	Business Type _____
Date Established _____	Owner Full Name _____
Business Address _____	City _____
Business state _____	Business zip _____
Phone Number _____	Fax Number _____
Tax ID Number _____	JBT Number _____
Bank Name _____	Bank Number _____
Bank Contact Name _____	
Vendor Name #1 _____	Vendor #1 Phone _____
Vendor #1 Fax _____	Vendor #1 Contact Name _____
Vendor Name #2 _____	Vendor #2 Phone _____
Vendor #2 Fax _____	Vendor #2 Contact Name _____
Vendor Name #3 _____	Vendor #3 Phone _____
Vendor #3 Fax _____	Vendor #3 Contact Name _____
Vendor Name #4 _____	Vendor #4 Phone _____
Vendor #4 Fax _____	Vendor #4 Contact Name _____

It is understood and agreed that payments received beyond the terms stated on Yerudiam invoices will be subject to late charges. As a further inducement to extend credit, I agree that in the event a lawsuit is brought on with regards to any obligation hereafter owed by me to Yerudiam, that I will (1) pay for reasonable attorney's fees and necessary collection costs incurred by Yerudiam in collecting the said obligation; and (2) pay collection agency costs or collection costs even if the lawsuit is not instituted.

Authorized by (please print): _____ Signed authorized signature: _____

Resale certificate #: _____ Title: _____

I hereby personally guarantee the obligation of the above.

Applicant signature (owner only) _____