



11600 Adelmo Lane
 Fort Myers, FL 33966 USA
 Web site:
www.crocinorthamerica.com

Telephone: 239-278-3066
 Toll Free: 800-951-1195
 Fax: 239-278-5977
 Email: info@crociusa.com

COMMERCIAL CREDIT APPLICATION (With Personal Guarantee)

Date: _____ Corporation Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Principal Officers :

 (Name _____ SSN _____) **President/Owner**

 (Name _____ SSN _____) **Vice President/Co-Owner**

Purchasing Contact: _____ Accounting Contact: _____

Business Phone: _____ Business Fax: _____

License #/CC#: _____ License Holder: _____

FEIN # : _____ Dunn & Bradstreet #: _____

****Please note that copies of your license and FEIN # must be submitted to establish an account.**

How Long In Business: _____ Years Type of Business: _____

Credit Line Requested: _____ Credit Terms Requested: _____

Bank References:

Name: _____ Phone Number: _____ Account Number: _____

Trade References: (If requesting terms, please provide only references with terms established.)

Name: _____ Address: _____ Phone Number: _____

Acct Number: _____ COD or Terms: _____ Fax Number: _____

Name: _____ Address: _____ Phone Number: _____

Acct Number: _____ COD or Terms: _____ Fax Number: _____

Name: _____ Address: _____ Phone Number: _____

Acct Number: _____ COD or Terms: _____ Fax Number: _____

Has this company been in bankruptcy, receivership, or had an administrator or receiver appointed at any time within the last 5 years? Yes _____ No _____

Has the below listed signatory and/or guarantor filed for bankruptcy at any time within the last 5 years? Yes _____ No _____

I, _____ authorize American Shutter Products, Inc. d.b.a. Croci North America to make credit inquiries for the purpose of establishing an open account. I further acknowledge that any credit privileges may be withdrawn at any time. I certify the information given is true and correct to the best of my knowledge. **If credit is granted by Croci North America, the undersigned agrees to pay when due all obligations and personally guarantees payment including court costs and attorney fees if the account is placed in collection for non-payment.**

 (Signature of Owner/Guarantor)

 (Date)