

Jeremie Corp.

1356 Chattahoochee Avenue
Atlanta GA 30318

PHONE: (404) 875-3593

FAX: (404) 875-8660

APPLICATION FOR CREDIT

BUSINESS INFORMATION

OWNER'S NAME:	_____	# OF YEARS IN BUSINESS:	_____
		(Must be at least 1 year)	
NAME OF BUSINESS:	_____	FEDERAL ID #:	_____
TYPE OF BUSINESS:	_____ CORPORATION	_____ PARTNERSHIP	_____ INDIVIDUAL
	If incorporated: State: _____	Date Incorporated: _____	
TELEPHONE NUMBER: ()	_____	FAX NUMBER: ()	_____
EMAIL ADDRESS:	_____		
BILLING ADDRESS:	_____		
	_____	_____	_____
	(CITY)	(STATE)	(ZIP)
SHIPPING ADDRESS:	_____		
	_____	_____	_____
	(CITY)	(STATE)	(ZIP)

BANK INFORMATION

NAME OF BANK:	_____		
BANK ADDRESS:	_____		
	_____	_____	_____
	(CITY)	(STATE)	(ZIP)
BANK TELEPHONE NUMBER: ()	_____	ACCOUNT #:	_____

CREDIT REFERENCES

BUSINESS NAME	COMPLETE ADDRESS	PHONE #

If you need additional space, feel free to include an additional piece of paper.

Do not forget to sign below.

Jeremie Corporation reserves the right to assign credit terms and credit limits based on information received during its inquiries.

- Invoices not paid within 30 days will be subject to a late charge.
- Any account not paid within 60 days will have Net 30 Terms revoked, and the account will revert to COD, credit card or prepaid terms.

I certify that all the information on this form is correct. I fully understand and agree to honor your credit terms as stated here and on the invoice.

NAME (Please Print) _____

SIGNATURE _____

TITLE _____

DATE _____