



# Credit Application

Please Complete and Fax to: 509-575-5330

## Company Information

Company Name: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## Type of Entity

Describe Business Activity: \_\_\_\_\_  
 Partnership  Corporation  Sole Proprietorship  Other: \_\_\_\_\_  
 Federal ID # or Social Security # \_\_\_\_\_  
 ICC/MC# \_\_\_\_\_ US DOT# \_\_\_\_\_ Years in Business? \_\_\_\_\_  
 Principal Owner or Shareholder: \_\_\_\_\_  
 Company Bank: \_\_\_\_\_ Contact: \_\_\_\_\_

## Credit References (must have 4 & include all information)

1) Name:	Ph.	Fax
Address:		Contact:
2) Name:	Ph.	Fax
Address:		Contact:
3) Name:	Ph.	Fax
Address:		Contact:
4) Name:	Ph.	Fax
Address:		Contact:

## Billing Information

Are Purchase Orders Required? Y/N \_\_\_\_\_  
 Limitation of Comments: \_\_\_\_\_  
 Special Instructions: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

(Below for internal use only)

Approved By: \_\_\_\_\_ Credit Limit: \$ \_\_\_\_\_ Date: \_\_\_\_\_

  
 509-575-8888  
 2003 E. Viola Ave.  
 Yakima, WA. 98901

  
 509-665-8383  
 1231 S. Wenatchee Ave.  
 Wenatchee, WA. 98801

  
 509-962-8881  
 1331 W. University Way  
 Ellensburg, WA. 98926