Application for Credit with Sharp Iron Group

Legal Name of Business:	dba			
Physical Address:				
	Address	City	State	Zip
Billing Address:				
	Address	City	State	Zip
Phone:	Fax:	Email:		
Check Legal Status:	Proprietorship Corporation	Partnership	Limited Liab	ility Company
List all Owners, Partners,	or Corporate Officers (and titles):			
State of Incorporation or	Registration of Partnership:	Date Incorporated o	or Established:	
Type of Business:		Number of	Employees:	
A/P Contact:	Phone:	Fa	x:	
Bank Name:	Office	er's Name:		
Phone#:				
Trade References: (at lea	st three)			
Name		Phone Number	Fax	Number
Name		Phone Number	Fax	Number
Name		Phone Number	Fax	Number
Submission of application ar references; (2) invoices paid	nd signature below is an agreement of under Net 30 terms.	f the following: (1) author	ization for banking a	nd/or trade
Signature / Title		Printed Name		Date