

# CARDINAL LEASING LLC

## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

### BUSINESS CONTACT INFORMATION

Title		Date business commenced	
Company name		<input type="checkbox"/> Sole proprietorship	
Phone   Fax		<input type="checkbox"/> Partnership	
E-mail		<input type="checkbox"/> Corporation	
Registered company address City, State ZIP Code		<input type="checkbox"/> Other	

### BUSINESS AND CREDIT INFORMATION

City, State ZIP Code		Bank name:	
How long have you been located at current address?		Primary business address City, State ZIP Code	
Phone		Phone	
Fax		Account number	
E-mail		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other
Individual responsible for pay bills.			
Do you want invoices emailed to you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide accounts payable email address:	

### BUSINESS/PERSONAL REFERENCES

Company that you Deliver for.?		Phone	
Plant Location		Fax	
Name of Company Rep.		E-mail	
How long have you delivered from this location?		Other	
Personal Reference #1		Phone	
Relationship to Ref. #1		Email:	
Personal Reference #2		Phone	
Relationship to Ref. #2		email	

### AGREEMENT

1. All invoices are to be paid on or prior to the due date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize CARDINAL LEASING LLC to make inquiries into the banking and business/trade references that you have supplied.

### SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	

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