



PO Box 507, Somerville, TN 38068 (901) 831-5155

## Credit Application

**Please fill out this application in its entirety.** Information given below will be held confidential and is exclusively for our use. **Please email to [theo.terry@bearonsite.com](mailto:theo.terry@bearonsite.com) or fax to: 877-653-4583.**

Company Name \_\_\_\_\_ (If subsidiary) Parent Company \_\_\_\_\_

Parent Company Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Shipping Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EIN No. (Fed. ID No.) \_\_\_\_\_

Full Name & Title of Person Requesting Credit \_\_\_\_\_

Email Address \_\_\_\_\_

Authorized Purchasing Agent \_\_\_\_\_ Sales Mgr. \_\_\_\_\_ A/P Contact \_\_\_\_\_

Requested Credit Limit \_\_\_\_\_ What do you estimate your monthly purchases will be? \_\_\_\_\_

Type of business organization:  Corporation  Partnership  Sole Proprietorship

Material purchased for:  Resale  Manufacturing  Other

Type of Business:  Manufacturer  Distributor/Wholesaler  Precaster  Other

Number of years in business \_\_\_\_\_ Are you listed in Dun & Bradstreet? \_\_\_ No \_\_\_ Yes : List D & B Number \_\_\_\_\_

**PRINCIPAL OWNER:** (If there are additional owners, please attach their full name, full address and phone numbers to this form)

Full Name \_\_\_\_\_ Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**BANK REFERENCES:** Please list references (USA companies preferred)

1) Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

2) Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

3) Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

How did you first learn about Bear Onsite? \_\_\_\_\_

I hereby certify that all information provided is true and authorize Bear Onsite, LLC to contact our trade and bank references for normal credit information. This information is furnished to Bear Onsite, LLC for the purpose of an extension of credit. I authorize the above listed references to provide Bear Onsite, LLC with information regarding our account history. I understand and agree to pay within the terms offered by Bear Onsite, LLC.

Signature of Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_

Printed Name & Title \_\_\_\_\_