



Buffalo Grove, IL 60089



CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION					
Company name		Date business commenced			
Registered company address City, State ZIP Code		☐ Sole proprietorship			
A/P Contact		☐ Partnership			
Phone		☐ Corporation			
E-mail		☐ Other			
BUSINESS AND CREDIT INFORMATION					
Annual sales	\$	Bank name:			
How long at current address?		Bank address City, State ZIP Code			
Number of employees		Phone			
Line of credit requested	\$	Account number			
		Type of account	□Savings □ Checking □ Other		
BUSINESS/TRADE REFERENCES					
Company name		Contact			
Address		Phone/Fax			
City, State ZIP Code		E-mail			
Company name		Contact			
Address		Phone/Fax			
City, State ZIP Code		E-mail			
Company name		Contact			
Address		Phone/Fax			
City, State ZIP Code		E-mail			
AGREEMENT					

- 1. All invoices are to be paid 30 days from the date of the invoice.
- 2. Claims arising from invoices must be made within seven working days.
- 3. By submitting this application, you authorize Hawk Electronics, Inc 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		