



FAX BACK TO: (303) 532-2384  
Mailing Address: 120 Ninth Ave  
Lone Mountain, CO 80591

## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

### BUSINESS CONTACT INFORMATION

Title:

Company name:

Phone:

Fax:

E-mail:

Registered company address:

City:

State:

ZIP Code:

Date business commenced:

Sole proprietorship:

Partnership:

Corporation:

Other:

### BUSINESS AND CREDIT INFORMATION

Primary business address:

City:

State:

ZIP Code:

How long at current address?

Telephone:

Fax:

E-mail:

Bank name:

Bank address:

Phone:

City:

State:

ZIP Code:

Type of account

Account number

Savings

Checking

Other

### BUSINESS/TRADE REFERENCES

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

### AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice. Customer understands that Circle will allocate an initial credit limit which must not be exceeded (or customer account will be placed on hold).
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Circle Graphics to make inquiries into the banking and business/trade references that you have supplied.

### SIGNATURES

Title:  
Date:

Title:  
Date: