

**LASERFAB CO LLC CREDIT APPLICATION**

26 Lebanon Valley Parkway

Lebanon, PA 17042

Phone: 717-272-0060

[Dain@Laserfab.net](mailto:Dain@Laserfab.net)

Business Name: \_\_\_\_\_

Subsidiary or Division of: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Federal Tax ID Number: \_\_\_\_\_

Is your company exempt from Sales Tax: YES  NO

If yes, please attach copy of certificate.

Officers: President/Manager \_\_\_\_\_

Vice President \_\_\_\_\_

A/P Contact \_\_\_\_\_

A/P Email \_\_\_\_\_

**Bank Reference**

Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

**Trade References:**

Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_

Credit Inquiry Email Contact \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_

Credit Inquiry Email Contact \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_

Credit Inquiry Email Contact \_\_\_\_\_

Credit Line Requested: \_\_\_\_\_

Pending Lawsuits Against Company: \_\_\_\_\_

I certify that the above information is correct and that Laserfab, Inc. is authorized to contact the above noted bank and trade references to evaluate credit worthiness.

Authorized Signature: \_\_\_\_\_

Print Name & Title \_\_\_\_\_

Date: \_\_\_\_\_