

## CREDIT APPLICATION - COMPANY PROFILE

**PLEASE PROVIDE THE FOLLOWING INFORMATION AND EMAIL BACK TO ACCOUNTING@PECATA.COM**

Company Name \_\_\_\_\_ Owner \_\_\_\_\_  
 Street Address \_\_\_\_\_ Contact \_\_\_\_\_  
 City \_\_\_\_\_ E-mail \_\_\_\_\_  
 State/Zip \_\_\_\_\_ Federal/Tax ID # \_\_\_\_\_  
 Telephone # \_\_\_\_\_ Bank Name \_\_\_\_\_  
 Fax # \_\_\_\_\_ Bank Telephone # \_\_\_\_\_  
 Company Website \_\_\_\_\_ Checking Account \_\_\_\_\_

### REFERENCES

Company Name	Account #	Phone #	Fax # (mandatory)
Company Name	Account #	Phone #	Fax # (mandatory)
Company Name	Account #	Phone #	Fax # (mandatory)
Company Name	Account #	Phone #	Fax # (mandatory)

### CREDIT CARD AUTHORIZATION FORM (For back-up and security purposes only)

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_ Security Code\* \_\_\_\_\_  
Visa/MasterCard Last 3-digit number printed on the back of card right in signature panel. Amex 4-digit code printed on front of your card.

Cardholder's Name \_\_\_\_\_ Phone \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Email \_\_\_\_\_

IN THE EVENT OF A RETURNED CHECK, PECATA ENT.INC., HAS THE AUTHORITY TO CHARGE THIS CREDIT CARD THE AMOUNT OF THE CHECK PLUS A \$25.00 RETURNED CHECK ADMINISTRATION FEE. IN THE EVENT THAT MY NET 30 ACCOUNT IS PAST DUE (FROM DATE OF INVOICE) AND ALL EFFORTS HAVE BEEN MADE BY PECATA ENT.INC. TO COLLECT PAST DUE FUNDS, THE FULL AMOUNT DUE WILL BE CHARGED TO MY ACCOUNT (YOU WILL BE NOTIFIED VIA PHONE OR FAX BEFORE CHARGE IS PROCESSED).

I hereby authorize the release of credit information requested by Pecata ent. inc. for the purpose of credit approval with this company.

X \_\_\_\_\_ X \_\_\_\_\_  
 Signature Please Print Name  
 Position \_\_\_\_\_ Date \_\_\_\_\_

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