Fine Leather Belts and Accessories

boston leather

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# CREDIT APPLICATION

**Company Name:**_____

**How did you hear about us?** _____

**Mailing** ******Address******* **Shipping**

**Address:** _____ _____

**City:**_____ _____

**State**_____ **Zip**_____ **State**_____ **Zip**_____

**Phone:**_____ **Fax**_____

**Full names of principals or officers:** **Email**_____

_____ **Title:**_____

_____ **Title:**_____

_____ **Title:**_____

**Nature of Business:**_____

**Date established:**_____**Resale or FEIN #**_____

## (Credit References)

**Name:**_____ **Account # :**_____
**Fax (Preferred):**_____**Phone:**_____
**Email:**

**Name:**_____ **Account # :**_____
**Fax (Preferred):**_____**Phone:**_____
**Email:**

**Name:**_____ **Account # :**_____
**Fax (Preferred):**_____**Phone:**_____
**Email:**

**Name:**_____ **Account # :**_____
**Fax (Preferred):**_____**Phone:**_____
**Email:**

**Our terms are net thirty days. By signing this form your firm agrees to pay within our terms. Thank you for your business.**

**Prepared by (please print):**_____

**Signature:** _____**Date:**_____
**(Principal or Officer)**