

CUSTOMER APPLICATION

Name of Client that you are	applying for credit with:				
COMPANY INFORMATION					
Legal Name:			Fed ID #:		
DBA:					
Address:		City:	State:	Zip Code:	
Phone:	Fax:	County/Parish:	Website:		
Mailing Address (If different from above):		City:	State:	Zip Code:	
DAILY CONTACT PERSON	Name:		Title:		
Phone:	Mobile:	Fax:	Email:		
FORM OF BUSINESS: S	Sole Proprietor Partner	rship Limited Partnership	LLC Corporation	Business Star	rt Date:
STATE or JURISDICTION C	F INCORPORATION / O	RGANIZATION:			
Home Office / Parent Compa	any:		City:		State:
Bankruptcy filings (company	or any principals)?:	Yes □ No If yes, which typ	e(s) and date(s):		
Purchase Order Required?	☐ Yes ☐ No N	lame of Authorized Person to Iss	ue Purchase Orders:		
Are you listed with Dun & Bra	adstreet? ☐ Yes ☐	No #:			
MOTOR CARRIER #:		DOT #:		NAICS #:	
PRINCIPALS & SHAREHOI	LDERS				
NAME (full legal)	TITLE	ADDRESS	PH	ONE	EMAIL ADDRESS
CREDIT REFERENCES					
CREDIT REFERENCES BANK NAME	ADDRE	ESS ACCC	UNT #	BANK OFFICER	PHONE
	ADDRE	ESS ACCC	UNT#	BANK OFFICER	PHONE
	ADDRE	SS ACCC	UNT#	BANK OFFICER	PHONE
	ADDRE	SS ACCC	UNT#	BANK OFFICER	PHONE
	ADDRE	SS ACCC	UNT#	BANK OFFICER	PHONE
BANK NAME	ADDRE		UNT#	BANK OFFICER PHONE	PHONE
BANK NAME TRADE CREDITORS					
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TRADE CREDITORS NAME OF COMPANY The Company applying for credit in this Peoples Bank of Alabama, may from tin that ProBilling & Funding Service may receive a due on the 15th day of the calendar mor	ADDRE Application ("Company") has request to time purchase accounts receituse to purchase accounts of the copy of this application and all such after the calendar month of the		EMAIL and any other client (collective on and agreements herein sole e without notice to Company o oncerning Company to ProBilli vice, after Company's refusal to vice, after Company's refusal to vice, after Company's ref	PHONE ly, "Clients") from whom Proly at the clients request to ober any other party. All parties ang & Funding Service. Compo pay, collects through an at	FAX Billing & Funding Service, a division of tain credit from clients and understand listed above, and with or without notice pany understands that all accounts are torney any indebtedness related to any
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PLEASE FORWARD COMPLETED CUSTOMER APPLICATION TO: credit@probfs.com or Fax (256) 301-0238
PAYMENTS REMIT TO ADDRESS: P.O. Box 2222, Decatur, AL 35609-2222

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