

## **CUSTOMER APPLICATION**

Name of Client that you are applying for c	redit 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	e: 	Fax:	Email:	
FORM OF BUSINESS:  Sole Proprietor  Partnership Limited Partnership LLC Corporation				
STATE or JURISDICTION OF INCORPO	RATION / ORGANIZ	ATION:	Business Start Da	te:
Home Office / Parent Company:		C	City:	State:
Bankruptcy filings (company or any princi	pals)? □ Yes □	No If yes, which typ	e(s) and date(s):	
Purchase Order Required? ☐ Yes ☐	No Name of A	authorized Person to Iss	sue Purchase Orders:	
Are you listed with Dun & Bradstreet?	☐ Yes ☐ No #:			
MOTOR CARRIER #:	DOT	Г#:	NAICS #:	
PRINCIPALS & SHAREHOLDERS				
NAME (full legal) TITLE	A	DDRESS	PHONE	EMAIL ADDRESS
CREDIT REFERENCES				
	ADDRESS	ACCOUNT#	BANK OFFIC	ER PHONE
5, 44(10,44)	7.000	7,0000111 //	27 1111 07 1 10	
TRADE CREDITORS				
	ADDRESS	EMA	AIL PHONI	E FAX
NAME OF COMPANY	ADDRESS	□ IVIF	THOIN	E FAX
The Company analysing for availt in this Analization (IICo		lit from the eliente lieted chare	and any other slight (calledively "Cli	antal) fram whom DraBilling & Funding Camina a division of
				ents') from whom ProBilling & Funding Service a division of a solely at the clients request to obtain credit from clients and
• • • •	•			pany or any other party. All parties listed above, and with or ProBilling & Funding Service. Company understands that all
accounts are due on the 15th day of the calendar month a	after the calendar month of t	he statement date. If ProBilling	& Funding Service, after Company's r	efusal to pay, collects through an attorney any indebtedness
				<ul> <li>Payments accepted in U.S. funds only. As a condition to uch financial statements as ProBilling may request. Further,</li> </ul>
Company agrees to provide ProBilling with written notice	of any change in the owners	ship of Company and to prompt	ly update this application with the appli	icable information of the new principals of Company.
Signature / Title	Print Name		Date	
PERSONAL GUARANTY				
				& Funding Service, a division of Peoples Bank of Alabama
("ProBilling"), from any Client with the above applicant or any other applicant with common ownership. The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guaranty hereby consents to and authorizes the use of consumer credit report on the undersigned, by ProBilling & Funding Service from time to time as may be needed in the				
credit evaluation process. The undersigned further agree	s to, from time to time, provi	de ProBilling with such person	al financial statements as ProBilling ma	ay request.
Signature / Title	Print Name		Date Sc	ocial Security#