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CREDIT APPLICATION FOR A BUSINESS ACCOUNT

Company Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Date Business Commenced: _____ D&B # _____
Sole Proprietorship ___ Partnership ___ Corporation ___ Other: _____

CREDIT INFORMATION

Bank Name: _____
Bank Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Type of Accounts:
Checking _____ Account Number: _____
Savings _____ Account Number: _____
Other _____ Account Number: _____

TAX EXEMPT? IF YES, PLEASE INCLUDE EXEMPTION CERTIFICATE WITH THIS APPLICATION

BUSINESS / TRADE REFERENCES

Company Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Type Of Account: _____

Company Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Type Of Account: _____

Company Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Type Of Account: _____

SIGNATURES

Name/Signature

Title

Date:

Name/Signature

Title

Date: