



STRUCTA WIRE CORP.
P.O. Box 414 - Custer, Washington 98240
1 - 8 0 0 - 8 8 7 - 4 7 0 8

APPLICATION FOR CREDIT
Customer Information Summary

In order for STRUCTA WIRE CORP. to extend credit, applicable information must be supplied

TRADE NAME: _____

ADDRESS: _____

MAILING ADDRESS: _____

CITY _____ **STATE** _____ **ZIP CODE** _____

PHONE _____ **FAX:** _____ **EMAIL** _____

BUSINESS TYPE: Corporation: ___ Partnership _____ Individual _____

If Corporation : **President:** _____
Vice President: _____
Treasurer: _____
State/Year Incorporated. : _____

If Partnership or Individual: Principals Home Information:

Name	Address	Phone
1.	_____	_____
2.	_____	_____
3.	_____	_____

Estimated monthly purchases: _____

Estimated Credit needed: _____

Accounts Payable Supervisor: _____

Structa Wire Corp.

CREDIT INFORMATION

Company name and Address:

Contact: _____
Title: _____

Phone: _____

FEDERAL TAX # _____
Resale Tax No.: _____

Fax: _____

EMAIL: _____

BANK REFERENCES:

Name of Bank _____

Bank Contact: _____

City: _____ **State:** _____ **Phone:** _____

CREDIT REFERENCES:

FIRM	CITY	STATE	PHONE #
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1. _____
2. _____
3. _____
4. _____

SALESMAN: _____ **CREDIT LIMIT DESIRED:** _____

SUBMITTED BY: _____

DATE: _____

Return completed form to:

Structa Wire Corp..

P.O. Box 414 - Custer, Washington 98240

Fax: 604 - 254-8530

Email: jan@structawire.com