



3131 W. Main  
Sedalia, MO 65301  
(660) 827-4251

APPLICATION FOR CREDIT

Date: \_\_\_\_\_ 20\_\_\_\_

Full Name of Firm: \_\_\_\_\_ Year Established: \_\_\_\_\_

Individual Owner: \_\_\_\_\_ Partnership: \_\_\_\_\_ Corporation: \_\_\_\_\_

NAME of owner(s): \_\_\_\_\_

If Partnership, name(s) of partner(s): \_\_\_\_\_

If Corporation, name(s) of Corporate Officers:

PRESIDENT: \_\_\_\_\_ Persons authorized to order:

VICE PRESIDENT: \_\_\_\_\_

TREASURER: \_\_\_\_\_

KIND OF BUSINESS: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_  
area code

**BUSINESS REFERENCES\***

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

WHERE DO YOU BANK? (name) \_\_\_\_\_

BRANCH: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

\*American Express, Diners, Carte Blanche, Department Stores and Oil Companies cannot be used as references.

BY: \_\_\_\_\_

(authorized signature only)