

1. Billing and Shipping Information

17952 Lyons Circle Huntington Beach, CA 92647

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Email: accounting@parwest.com

## **Credit Application**

Company Name:		Phone#		
Billing Address:		Fax# State: Zip: Country:		
City:	State:	Zip:	Country:	
Email Address:				
Would you like your Invoices Email	led, Faxed or Mailed	to you?		
*** Sh	ip to address (if d	ifferent) ***		
Company Name:		Phone#		
Shipping Address:		 Fax#		
Shipping Address: City:	State:	Zip:	Country:	
Email Address:		' <u></u>		
2. Misc. Information				
Type of business:				
/ears at current address:	Years i	n Business:		
OUNS# Resal	 e#	Fed I.D.#		
Anticipated monthly business with Par We	st:	Years in Business:Fed I.D.#Credit amount requested:		
<b>,</b>				
3. Banking Information				
Name of Bank	Account #	ŧ		
Name of Bank: Address: Phone #:	City:	·	7in <sup>.</sup>	
Phone #			<b>2</b> .p	
Name: Address:	City: _		Zip:	
Name:		Phone#:		
Name: Address:	City: _		Zip:	
Name:	Phone#:Zip:			
Address:	City: _		Zip:	
5. Additional Information (Circle One) Proprietorship – Corportist owner or owners names if Proprietorshohone #,and Social Security #	hip. List officers name	es, titles if Cor		
in order to obtain merchandise on credit from Par West Toelow, you do hereby agree all indebtedness is due and pendividual invoices:	payable in full in accordance	with the terms esta	blished and/or as reflected on	
Print Name:	Authorized Sigr	nature:		
Title·	Date <sup>.</sup>			