



# Credit Application

In order to establish an account with Tapis, please complete the credit information below and fax this form to 914-273-2875, Attn: Jill/Accounting. Thank you for your cooperation.

## Name/Address

Last:	First:	Title:
Name of Business:		Tax ID #:
Address:		
City:	State:	Zip:
Phone:	Fax:	

## Company Information

Type of Business:	In business since:	
Legal form under which business operates:	<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship	
If division/subsidiary, name of parent company:	In business since:	
Name of company principal responsible for business transactions:	Title:	
City:	State:	Zip:

## Bank References

Institution Name:	Institution Name:	Institution Name:
Checking Account #:	Savings Account #:	Home Equity Loan #/balance:
Address:	Address:	Address:
Phone:	Phone:	Phone:

## Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone/Fax:	Phone/Fax:	Phone/Fax:
Account opened since:	Account opened since:	Account opened since:
Credit limit:	Credit limit:	Credit limit:
Current balance:	Current balance:	Current balance:

I hereby certify that the information contained herein is complete and accurate. I understand that this information will be used to determine the amount and conditions of the credit to be extended. I also hereby authorize the financial institutions listed in this credit application to release necessary information to Tapis Corporation in order to verify the information contained herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

App. Karen Caputo 11/1/11