



# Engineered Air, Inc.

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## BUSINESS CREDIT APPLICATION

### NAME / ADDRESS

Name of Business:	Tax I.D. Number:	
Billing Address:	Phone:	
Physical Address:	Fax:	
City:	State:	Zip:

### COMPANY INFORMATION

Type of Business:	In Business Since:		
Legal Form Under Which Business Operates:	Corporation <input type="checkbox"/>	Partnership <input type="checkbox"/>	Proprietorship <input type="checkbox"/>
Name of Company Principal Responsible for Business Transactions:	Title:		
Address:	City:	State:	Zip:

### BANK REFERENCES

Institution Name:	Address:	Phone:
Checking Account No.	Savings Account No.	

### TRADE REFERENCES

Company Name:	Address:	Contact:	Phone: Fax:
Account Opened Since:	High Credit:	Current Balance:	
Company Name:	Address:	Contact:	Phone: Fax:
Account Opened Since:	High Credit:	Current Balance:	
Company Name:	Address:	Contact:	Phone: Fax:
Account Opened Since:	High Credit:	Current Balance:	

### STATEMENT OF ACCURACY AND PERMISSION TO VERIFY

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and condition of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Signature \_\_\_\_\_

Date \_\_\_\_\_

