

# CREDIT APPLICATION

R & W Engraving, Inc. / Quick Copy Center  
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Date: \_\_\_\_\_ Amount of credit requested? \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_ State Resale Tax No. \_\_\_\_\_

Ownership: Sole Ownership \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ State of: \_\_\_\_\_

Principals Name: \_\_\_\_\_ Home Phone#: \_\_\_\_\_

## Trade References

**Please do not list references where you are on C.O.D. basis. Please fill in complete address.**

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

4. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## Bank Reference

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Account Number: \_\_\_\_\_ Phone #: \_\_\_\_\_

**I hereby certify that the information submitted on this application is correct and authorize  
R & W Engraving, Inc. / Quick Copy Center to investigate our credit references.**

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE ALLOW 30 DAYS FOR CREDIT APPROVAL**

**IMPORTANT NOTICE: ONLY COMPLETE AND SIGNED APPLICATIONS CAN BE PROCESSED.**