

Application for Credit

This application is for the purpose of opening an account with our Company.
Please submit the following to enable us to obtain a credit history of your company.
Phone: 1-860-378-0302 Fax: 1-860-378-0340

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number _____ E-mail: _____

Type of Business: Corporation ____ Partnership ____ Proprietorship ____ Name
of Owners or Officers

Name: _____ Position: _____ S/S Number: _____

Name: _____ Position: _____ S/S Number: _____

Accounts Payable Contact: _____

Sales Tax Number: _____ Exempt: Yes ____ No: ____

(If yes we MUST have a tax exempt Certificate on File)

Federal ID Number: _____ Year Business Established: _____

Bank Information

Bank Name: _____ Address: _____

Bank Phone Number: _____ Contact: _____

Trade References (please supply three)

Name: _____

Address: _____

Phone, Fax, Email: _____

Name: _____

Address: _____

Phone, Fax, Email: _____

Name: _____

Address: _____

Phone, Fax, Email: _____

I am aware that the above information will be used to establish a credit payment history on my Company. If I am granted a open account with Login Lock Service, I understand that my account must be kept current or I will be subject to interest charges of 1.5% per month or the maximum allowed by law.

Signature: _____ Position: _____ Date: _____



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Toll Free 888-LoginLock or www.LoginLock.com

We will match any competitive quote with an equal price or better value.