

Subsidiary of The Holden Corporation

## **Credit Application**

Business Name			
Billing Address			
Physical Address			
(Required)			
Telephone Number	Fax Number		
Accounts Payable Conta	t Telephone Number		
Type of Ownership:	Corporation	_ Partnership	Limited Partnership
	Limited Liability Co.	Sole Propriet	or Other
Type of Business:	Date Started// Federal ID #		
Owners and/or Officers	:		
Name		Title	
Name		Title	
Bank Reference:			
Name		Telephone Number	
		Checking Account #	
		Savings Accoun	Savings Account #
Trade References (3 Red	quired):		
Company	<u>Address</u>	<u>Phone</u>	Fax-very important
1			
2			
2			
Signature			/ Date//