

You are receiving this credit application in order to request credit from Justin Blair & Company. We respectfully request that you fill out this form in its entirety so that we may confirm the information.

CREDIT DEPARTMENT

Credit Manager: **Paula Antczak**

Email: **paula@justinblair.biz**

Business Name _____
Street Address 1 _____
Street Address 2 _____
City, State, Zip _____
Telephone _____
Fax _____
Accounts Payable Contact _____
Purchasing Contact _____
Email _____

Bank Name _____
Address _____
City, State Zip _____
Phone _____
Fax _____
Contact: _____
Fed ID# _____
D&B # _____

Please send us a copy of your tax exemption certificate along with this completed application.

REFERENCES (3 Required)

I give Justin Blair & Company permission to obtain information on my credit through the below contacts only.

Signature: _____

Business _____
Contact _____
Address _____
City, State, Zip _____
Phone _____
Fax _____

Business _____
Contact _____
Address _____
City, State, Zip _____
Phone _____
Fax _____

Business _____
Contact _____
Address _____
City, State, Zip _____
Phone _____
Fax _____

OFFICE USE ONLY

COMMENTS

APPROVED CREDIT LIMIT