

APPLICATION FOR CREDIT



FAX TO:
Accounting
(760) 435-1162 **METRO REP:** _____

Metro Roof Products
 3093 'A' Industry Street
 Oceanside CA USA 92054
 Tel: (760) 435-9842 Fax: (760) 435-1162

1-COMPANY INFO

COMPANY LEGAL NAME: _____

ST ADDRESS (No P.O. Box) _____

CITY: _____ STATE: _____ ZIP: _____

_____ Telephone _____ Facsimile _____

E-MAIL: _____

2-CORPORATE INFO

CORPORATION PARTNERSHIP PROPRIETORSHIP INDIVIDUAL YR's IN BUSINESS _____ No. of EMPLOYEES _____

OWNER(s) or OFFICER(s) _____ TITLE _____ SS# _____

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STATE or FEDERAL ID# _____ DUN & BRADSTREET # _____

3-REFERENCES

COMPANY: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

_____ Telephone _____ Facsimile _____

COMPANY: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

_____ Telephone _____ Facsimile _____

COMPANY: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

_____ Telephone _____ Facsimile _____

4-BANK INFO

BANK _____

BRANCH _____ PH _____ FX _____

My signature below authorizes _____ (Name of Bank) to supply METRO ROOF PRODUCTS or there agents with the information listed below.

ACCOUNT # _____ TYPE of ACCOUNT _____

5-BANK USE ONLY

Checking Account Current Balance \$ _____ Checking Account Average Balance \$ _____ Any NSF's ? _____

Amount of Loans Secured or Unsecured \$ _____

Date Account Opened _____ Opening Balance \$ _____ Terms _____ Present Loan Balance \$ _____

How Long Has The Bank Dealt With This Company? _____ General Account Comments _____

Have you ever filed for bankruptcy, as an individual, partner, or an officer of a corporation? YES - NO - (If YES please attach an explanation)

6-SIGNATURE

PERSONS AUTHORIZED TO SIGN ON THIS ACCOUNT _____

CREDIT LINE REQUESTED \$ _____ Attach a copy of your latest Financial Statement, (IF one is not available please attach an explanation).

SPECIAL NOTICE:

By signing this Application for Credit, I hereby Authorize Metro and my Bank named above to obtain / provide any and all necessary credit information to open an account in my company name. I will honor Metro's terms of sale and understand that interest charges may be applied against any past due balances on my account.

 (Signature) (Print Name)

 (Title) (Date)