

## PHONE 1.510.475.6363 | FAX 1.510.475.6365 3225 W. Whipple Road, Union City, CA 94587 www.parslighting.com

Company Legal Name:		
Address:		
Phone:	Fax:	
Years in business: Tax	ID#:	
TRADE REFERENCES		
Company:	Company:	
Contact:	Contact:	
Phone/Fax:	Phone/Fax:	
Company:	Company:	
Contact:	Contact:	
Phone/Fax:	Phone/Fax:	
BANK REFERENCES		
Name of Bank:	Phone:	
Contact:	Acet#:	
Loan (s) outstanding: yes ( ) no ( )	Balance:	
SOLE OWNER/PARTNERSHIP		
Owners full name:		
Owners birthdate:		
Spouse full name (if applicable):		
Spouse birthdate:		
SS#:	Years in business:	
Residence address:		
Residence phone:		



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## CREDIT APPLICATION CORPORATION

Chartered in the state of:	When:
Registered Agent:	
investigation, I authorize Pars Lighting Products Co LLC to opening, monitoring, renewal and extension of credit. was requested and if so the name and address of the co	ducts Co LLC or its agent to investigate my business, as part of such request and obtain consumer credit reports in connection with the If I request you will tell me whether my consumer credit report onsumer credit reporting agency the furnished the report. We prome event it becomes necessary to place out account for collection we on of this debt.
Company Name	
Authorized Signature	Title:



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## **CUSTOMER INFORMATION**

Customer Name:	
Address:	
Bill to address:	
Phone number:	
Fax number:	
Email address:	
Accounts Payable:	
Phone number:	 Ext.
Email address:	
Purchasing Dept. Contact:	
Phone number:	 Ext.
Email address:	
Controller:	
Phone number:	Ext.
Email address:	