



# APPLICATION FOR CREDIT

Name of Firm or Individual _____		Years at this address _____	
Address _____			
City _____	State _____	Zip _____	Area Code _____ Phone _____

Hereby applies for credit in accordance with the terms and conditions of:

Lights On First  
105 4<sup>th</sup> Street N.E.  
Waite Park, MN 56387

\_\_\_\_\_  
Credit Manager

\_\_\_\_\_  
Our Normal Credit Terms

The following information must be provided. It will be held in the strictest confidence.

Corporation  Check here if incorporated within the past 12 months  Partnership  Individual

1. _____	_____
Name(s) of Principal(s)	Phone
2. _____	_____
3. _____	_____
4. _____	_____

Bank _____	Bank Address _____
Bank Officer or Department _____	Phone _____

References

1. _____	_____	_____	_____
Business Name	Complete Address	Zip	Phone
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

Check here if cash sales are okay until credit is approved.

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Date \_\_\_\_\_ 20 \_\_\_\_ (Signed) \_\_\_\_\_  
(Title) \_\_\_\_\_

Please do not write in the space below

References checked by _____	Credit Approved By _____
Reference Results _____	Credit Refused By _____
_____	Date _____