Customer Credit Application

All fields are required unless otherwise indicated

Company

Company Information	
Company Name:	
Address:	
City:	
Ctata	
Zip:	
Country:	
Phone:	
optional Fax:	
Company Details	
Type of Company:	
Owners/Officer - Names:	
-	
Accounts Payable Conta	ct
Name:	
Phone:	

Customer Credit Application

Trade References

(minimum of three)

Note: Do **NOT** include distributors or competitors.

Reference #1	
Company Name:	
Address:	
City:	
Account#:	

Customer Credit Application

Trade References (cont'd)

(minimum of three)

Note: Do **NOT** include distributors or competitors.

Reference #2	
Company Name:	
Address:	
Addiess.	
-	
City:	
Account#:	

Customer Credit Application

Trade References (cont'd)

(minimum of three)

Note: Do **NOT** include distributors or competitors.

Reference #3	
Company Name:	
Address:	
City:	
Account#:	

Customer Credit Application

Bank Information Bank Information Bank Name: Bank Officer: Account #: Phone: _____ optional Fax: State: _____ **Important!** Authorization Important! I hereby authorize the release of all credit information to MH&W International, Corp. Authorized by: _____ E-Mail: Submit completed form via: MAIL: MH&W International Corp. **EMAIL**: admin@mhw-intl.com 575 Corporate Drive **FAX**: (201) 891-0625 Lobby 4 Mahwah, NJ 07430-2330 USA