

## 301 34th Ave S. Waite Park, MN 56387

Phone: 320-774-1999 Email: ventiques@gmail.com Date:

## **CREDIT APPLICATION**

COMPANY INMORMA	ATION					
Full Legal Name/Business Er	ntity		Phon	e #	Fax #	
Billing Address						
City	State	Zip	Coun	ty	<del></del>	
Type of Ownership:	le Proprietorship	Partnership	orporation	☐ Other:	· · · · · · · · · · · · · · · · · · ·	
Tax Exempt? Yes No	Annual Sales	Years in Busines	S	# of Employees	Credit Desired	
Are you member of a Buying	Group? Yes No	If Yes, which group	);	N TO THE RESIDENCE OF THE SECOND STATE OF THE		
Property Information:	nformation:   Lease/Annual Payment:   Own/Annual Mortgage Payment: \$					
CONTACT INFORMA	TION					
Company Owned By:		Home Phone #		Email		
Home Address	-	City	State	Zip	County	
Second Owner if Applicable:		Home Phone #		Email		
Home Address:		City	State	Zip	County	
Accounts Payable Contact	Title	Phone		Email		
ADDITIONAL CONTA	ACT INFORMATI	ON				
Ventiques communicates impeach person below, if there is contact above please check is	oortant information regu s not an email address a	larly to its customers.	Please pro de a phone	vide an email addres number. If all emails	s for should go to the primary	
Sales & Marketing Contact	Title	Email		Phon	e#	
Specials/Promos Contact	Title	Email		Phon	e#	
Price Lists Contact	Title	Email		Phon	e#	
Other Contact	Title	Email		Phon	e#	

Bank Name	Account #			Contact		
Trade Reference	ES					
Company Name		Account #	The state of the s	Contact		
Address	City	State	Zip	Phone #	Fax #	
Company Name		Account #		Contact		
Address	City	State	Zip	Phone #	Fax #	
Company Name		Account #		Contact		
Address	City	State	Zip	Phone #	Fax #	
Company Name	<u> </u>	Account #		Contact		
Address	City	State	Zip	Phone #	Fax #	
The undersigned individual recognizing that his or her i consents to and authorizes grantor, from time to time a	ndividual credit histo the use of a consum s may be needed, in	ry may be a fa ner credit repo the credit eva	ctor in the event on the under the leading to the leading the leading to the lead	valuation of the credit his ersigned by the above na ss.	tory of the applicant, hereb	
Signature:				Date:		
Print Name:				Title:		
		FOR INTERI	NAL USE ON	ILY		
Salesperson:			Credit I	Limit:		
Approved by:			D-4- A	oproved:		

