



**CREDIT APPROVAL REQUEST**

**FAX TRANSMISSION**

1370 Rochester Street  
Lima, NY 14485

800-215-5865 TOLL FREE  
585-582-5120 Office  
585-582-5110 Fax

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web Site: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

From: Kathy Mulley, Accounting  
Subject: CREDIT APPLICATION

Please complete the following credit application and return by fax to the attention of Kathy Mulley.

Our Company policy for all first-time orders of \$2,000.00 or more is as follows:

- with credit approval prior to shipment - 50% down - balance due in 30 days
- without credit approval prior to shipment - 50% down - balance due upon shipping
- same day shipments - entire balance due upon shipping

Please allow up to 3 business days to process application.

For speedier processing - make sure references are current/updated and have experienced the same or greater dollar volume you are requesting from Bristol.

A finance charge of 1.5% per month will be charged to all past due accounts.

Bristol ID Technologies gladly accepts: VISA, MASTERCARD AND AMERICAN EXPRESS.

We look forward to doing business with you.

**PLEASE FAX TO 585-582-5110 FOR PROCESSING.  
ALL APPLICATIONS ARE SUBJECT TO FINAL CREDIT APPROVAL.**

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FAX TRANSMISSION

\_\_\_\_ Corporation  
\_\_\_\_ Sole Proprietorship  
\_\_\_\_ Partnership  
\_\_\_\_ Other

New Account \_\_\_\_\_ Credit Revision \_\_\_\_\_  
Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web Site: \_\_\_\_\_

Sales Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

Dollar Amount of Initial Order: \_\_\_\_\_

Monthly Credit Required: \_\_\_\_\_

Anticipated Yearly Sales: \_\_\_\_\_

State Tax Number: \_\_\_\_\_

Federal Tax Number: \_\_\_\_\_

Ship to Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### THREE CREDIT REFERENCES & BANK REFERENCE

Please include: Account Number, Complete Address, Telephone, Fax Number & Contact Name.

This section must be completely filled out otherwise there might be a considerable delay in the processing of this request for credit

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Bank: \_\_\_\_\_

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D & B Rating: \_\_\_\_\_

Credit Limit: \_\_\_\_\_

Credit Approved By: \_\_\_\_\_

Credit Refused By: \_\_\_\_\_